

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

April 12, 1990

STATEMENT BY THE PRESS SECRETARY

The President and Mrs. Bush's 1989 tax return shows that they have paid \$101,382 in Federal Income Tax on an Adjusted Gross Income of \$456,780, of which \$189,167 was the President's salary.

In addition, the President received \$6,229 as salary while serving as Vice President during 1989. The Bushes also reported \$208,274 in income from their Blind Trust, \$804 in interest income and \$16,238 in income from other sources. A net long-term capital gain from the Blind Trust of \$36,068 was also reported. The Blind Trust is managed by Bessemer Trust Company, N.A., New York City.

The President and Mrs. Bush claimed \$94,702 in itemized deductions, which included \$37,272 in contributions to 39 charities and \$594 to charities through the Blind Trust. The net royalties received in 1989 of \$14,282 from the President's book, Looking Forward, were given to charitable organizations included in this list.

The President and Mrs. Bush's tax return has been reviewed by the Office of Government Ethics and will be filed in the Philadelphia Regional Office of the Internal Revenue Service.

#

For the year Jan. - Dec. 31, 1989, or other tax year beginning

1989, ending

19

OMB No. 1545-0074

Label

Use IRS label.
Otherwise
please print
or type.

Your first name and initial

Last name

Your social security number

GEORGE H.W.

BUSH

Spouse's first name and initial

Last name

Spouse's social security number

BARBARA P.

BUSH

C/O BESSEMER TRUST COMPANY, N.A.
630 FIFTH AVENUE-TAX DEPT
NEW YORK NY 10111For Privacy Act and
Paperwork Reduction
Act Notice, see
Instructions.Presidential
Election Campaign

Do you want \$1 to go to this fund?

☒ Yes☐ NoNote: Checking "Yes" will
not change your tax
or reduce your refund.

If joint return, does your spouse want \$1 to go to this fund?

☒ Yes☐ No

Filing Status

Check only
one box.

- 1 ☐ Single
- 2 ☒ Married filing joint return (even if only one had income)
- 3 ☐ Married filing separate return. Enter spouse's social security no. above and full name here. _____
- 4 ☐ Head of household (with qualifying person). (See page 7 of Instructions). If the qualifying person is your child but not your dependent, enter child's name here. _____
- 5 ☐ Qualifying widow(er) with dependent child (year spouse died \geq 19). (See page 7 of Instructions).

Exemptions

(See
Instructions
on page 8.)6a ☒ Yourself If someone (such as your parent) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 33b on page 2. . . }No. of boxes
checked on 6a
and 6b

2

b ☒ Spouse

c Dependents

(1) Name (first, initial, and last name)

(2) Check
if under
age 2(3) If age 2 or older,
dependent's
social security number

(4) Relationship

(5) No. of months
lived in your
home in 1989No. of your
children on 6c
who:

• lived with you

• didn't live with
you due to divorce
or separation (see
page 8)No. of other
dependents
on 6cIf more than 7
dependents, see
Instructions on
page 8.

d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here.

e Total number of exemptions claimed

Add numbers
entered on
lines above

2

Income

Please attach
Copy B of your
Forms W-2, W-2G,
and W-2P here.If you do not have
a W-2, see
page 6 of
Instructions.Please
attach check
or money
order here.

7	Wages, salaries, tips, etc. (attach Form(s) W-2)	7	196,810
8a	Taxable interest income (also attach Schedule B if over \$400)	8a	17,412
b	Tax-exempt interest income (see pg. 10) DONT include on line 8a	8b	9,464
9	Dividend income (also attach Schedule B if over \$400)	9	9,997
10	Taxable refunds of state and local income taxes, if any, from worksheet on page 11 of Instructions	10	
11	Alimony received	11	
12	Business income or (loss) (attach Schedule C)	12	
13	Capital gain or (loss) (attach Schedule D)	13	36,068
14	Capital gain distributions not reported on line 13 (see page 11)	14	
15	Other gains or (losses) (attach Form 4797)	15	
16a	Total IRA distributions	16a	
16b	Taxable amount (see page 11)	16b	
17a	Total pensions and annuities	17a	
17b	Taxable amount (see page 12)	17b	
18	Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	18	196,493
19	Farm income or (loss) (attach Schedule F)	19	
20	Unemployment compensation (insurance) (see page 13)	20	
21a	Social security benefits	21a	
21b	Taxable amount (see page 13)	21b	
22	Other income (list type and amount - see page 13)	22	
23	Add the amounts shown in the far right column for lines 7 through 22. This is your total income	23	456,780
24	Your IRA deduction, from applicable worksheet on page 14 or 15	24	
25	Spouse's IRA deduction, from applicable worksheet on page 14/15	25	
26	Self-employed health insurance deduction, from worksheet on page 15	26	
27	Keogh retirement plan and self-employed SEP deduction	27	
28	Penalty on early withdrawal of savings	28	
29	Alimony paid a Recipient's last name and b social security no.	29	
30	Add lines 24 through 29. These are your total adjustments.	30	
31	Subtract line 30 from line 23. This is your adjusted gross income. If this line is less than \$19,340 and a child lived with you, see "Earned Income Credit" (line 58) on page 20 of the Instructions. If you want IRS to figure your tax, see page 16 of the Instructions.	31	456,780

Adjusted
Gross Income

Power of Attorney and Declaration of Representative

OMB No. 1545-0150
Expires 12-31-90

See separate instructions.

Part I Power of Attorney

For IRS Use Only

(Please type or print)	Taxpayer(s) name(s) George H. W. Bush Barbara P. Bush	Taxpayer identification number	File So
	Address (number and street) The White House	Plan number (if applicable)	Level
	City, state, and ZIP code Washington, D.C. 20500	Telephone number 202-456-1414	Receipt
			Powers
			Blind T
			Action
			Ret. Ind.

hereby appoint(s) the following individual(s)*

Name	CAF Number	Address	New Appoint	Telephone Number
See Appendix A, Attached				

as attorney(s)-in-fact to represent the taxpayer(s) before any office of the Internal Revenue Service for the following tax matter(s) (specify the type(s) of tax and year(s) or period(s) (date of death if estate tax)):

Type of tax (Individual, corporate, etc.)	Federal tax form number (1040, 1120, etc.)	Year(s) or period(s) (Date of death if estate tax)
Individual Income Tax	1040	1989
Individual Declaration of Estimated Tax	1040-ES	1990

The attorney(s)-in-fact (or either of them) are authorized, subject to revocation, to receive confidential information and to perform any and all acts that the principal(s) can perform with respect to the above specified tax matters ~~including the preparation of tax returns and the payment of taxes~~ and specifically to perform those acts specified on Appendix B hereto.

- ☐ Send originals of all notices and all other written communications in proceedings involving the above tax matters to the appointee first named above, and a duplicate copy of all notices and all other written communications to the taxpayer named above, or
- ☒ Send copies of all notices and all other written communications addressed to the taxpayer(s) in proceedings involving the above tax matters to:
- ☒ the appointee first named above, or with no copies to the taxpayer
 - ☐ (names of not more than two of the appointees named above)

Initial here BFB if you are granting the power to receive, but not to endorse or cash, refund checks for the above tax matters to:

- ☒ the appointee first named above, or
- ☐ (name of one of the above designated appointees)

This power of attorney revokes all earlier powers of attorney and tax information authorizations on file with the Internal Revenue Service for the same tax matters and years or periods covered by this power of attorney, except the following:

(Specify to whom granted, date, and address including ZIP code, or refer to attached copies of earlier powers and authorizations.)

Signature of or for taxpayer(s)

(If signed by a corporate officer, partner, or fiduciary on behalf of the taxpayer, I certify that I have the authority to execute this power of attorney on behalf of the taxpayer.)

✓ George H. W. Bush (Signature) (Title, if applicable) 3-20-90 (Date)
(Also type or print your name below if signing for a taxpayer who is not an individual.)

✓ Barbara P. Bush (Signature) (Title, if applicable) 3-20-90 (Date)

* You may authorize an organization, firm, or partnership to receive confidential information, but your representative must be an individual who must complete Part II.

For Privacy Act and Paperwork Reduction Act Notices, see page 1 of the separate instructions.

For 2848 1-88

APPENDIX A

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>
Mr. John R. Whitmore	Bessemer Trust Company, NA 630 Fifth Avenue New York, NY 10111	212-708-9111

90-11111

APPENDIX B

1. Prepare, sign and file return.
2. Receive, but not endorse or cash, refund checks for the above tax matters.
3. Execute waivers (including offers of waivers) of restrictions on assessment or collection of deficiencies in tax and waivers of notice of disallowance of a claim for credit or refund.
4. To execute consents extending the statutory period of assessment or collection of taxes.
5. Execute closing agreements under section 7121 of the Internal Revenue Code.

Tax
Compu-
tation

32	Amount from line 31 (adjusted gross income)	32	456,780
33a	Check if: <input type="checkbox"/> You were 65 or older <input type="checkbox"/> Blind; <input type="checkbox"/> Spouse was 65 or older <input type="checkbox"/> Blind.		
	Add the number of boxes checked and enter the total here	33a	
b	If someone (such as your parent) can claim you as a dependent, check here	33b	
c	If you are married filing a separate return and your spouse itemizes deductions, or you are a dual-status alien, see page 16 and check here	33c	
34	Enter the Larger { of { • Your standard deduction (from page 17 of the instructions). OR • Your itemized deductions (from Schedule A, line 26). If you itemize, attach Schedule A and check here <input checked="" type="checkbox"/> X	34	94,702
35	Subtract line 34 from line 32. Enter the result here	35	362,078
36	Multiply \$2,000 by the total number of exemptions claimed on line 6e	36	4,000
37	Taxable income. Subtract line 36 from line 35. Enter result (if less than zero, enter zero)	37	358,078
	Caution: If under age 14 and you have more than \$1,000 of investment income, check here <input type="checkbox"/> and see page 17 to see if you have to use Form 8615 to figure your tax.		
38	Enter tax. Check if from: a <input type="checkbox"/> Tax Table, b <input checked="" type="checkbox"/> Tax Rate Schedules, or c <input type="checkbox"/> Form 8615 (If any is from Form(s) 8614, enter that amount here) d <input type="checkbox"/>	38	101,382
39	Additional taxes (see page 18). Check if from: a <input type="checkbox"/> Form 4970, or b <input type="checkbox"/> Form 4972	39	
40	Add lines 38 and 39. Enter the total	40	101,382

Credits

(See
instructions
on page 18.)

41	Credit for child and dependent care expenses (attach Form 2441)	41	
42	Credit for the elderly or the disabled (attach Schedule R)	42	
43	Foreign tax credit (attach Form 1116)	43	
44	General business credit. Check if from: a <input type="checkbox"/> Form 3800 or b <input type="checkbox"/> Form (specify)	44	
45	Credit for prior year minimum tax (attach Form 8801)	45	
46	Add lines 41 through 45. Enter the total	46	
47	Subtract line 46 from line 40. Enter the result (if less than zero enter zero)	47	101,382

Other
Taxes(Including
Advance EIC
Payments)

48	Self-employment tax (attach Schedule SE)	48	
49	Alternative minimum tax (attach Form 6251)	49	
50	Recapture taxes (see page 18). Check if from: a <input type="checkbox"/> Form 4255 b <input type="checkbox"/> Form 8611	50	
51	Social security tax on tip income not reported to employer (attach Form 4137)	51	
52	Tax on an IRA or a qualified retirement plan (attach Form 5329)	52	
53	Add lines 47 through 52. Enter the total	53	101,382

Medicare
Premium

54	Supplemental Medicare premium (attach Form 8808)	54	
55	Add lines 53 and 54. Enter the total. This is your total tax and any supplemental Medicare premium	55	101,382

Payments

Attach Forms
W-2, W-2G,
and W-2P
to front

56	Federal income tax withheld (if any is from Form(s) 1099, check <input type="checkbox"/>)	56	54,686
57	1989 estimated tax payments & amount applied from 1988 return	57	43,000
58	Earned income credit (see page 20)	58	
59	Amount paid with Form 4868 (extension request)	59	
60	Excess social security tax and RRTA tax withheld (see page 20)	60	468
61	Credit for Federal tax on fuels (attach Form 4136)	61	
62	Regulated investment company credit (attach Form 2439)	62	
63	Add lines 56 through 62. These are your total payments	63	98,154

Refund or
Amount
You Owe

64	If line 63 is larger than line 55, enter amount OVERPAID	64	
65	Amount of line 64 to be REFUNDED TO YOU	65	
66	Amount of line 55 to be APPLIED TO YOUR 1990 ESTIMATED TAX	66	
67	If line 55 is larger than line 63 enter AMOUNT YOU OWE. Attach check or money order for full amount payable to "Internal Revenue Service." Write your social security number, full name, phone number, and "1989 Form 1040" on it	67	3,228
68	Penalty for underpayment of estimated tax (see page 21)	68	

Sign
Here(Keep a copy
of this return
for your
records.)

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

George H. W. Bush, Barbara P. Bush

Date

4/4/90

Your occupation

PRESIDENT

Spouse's signature (if filing jointly, BOTH must sign)

John P. Whitmore, Attorney

Date

4/4/90

Spouse's occupation

HOUSEWIFE

Paid
Preparer's
Use Only

Preparer's signature

John Clapp

Date

4/4/90

Check if

self-employed ☐

Preparer's social security no.

Firm's name (or
yours, if self-employed)
and addressBESSEMER TRUST CO., N.A.
630 FIFTH AVENUE NEW YORK NY

E.I. No. 13-2792165

ZIP code 10111

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service

Itemized Deductions

▶ Attach to Form 1040

▶ See Instructions for Schedule A (Form 1040)

OMB No. 1545-0047

1989

Attachment
Sequence No. **07**

Name(s) as shown on Form 1040

Your social security number

GEORGE H.W. & BARBARA P. BUSH

**Medical and
Dental Expenses**

(Do not include
expenses
reimbursed or
paid by others.)

(See
Instructions
on page 23.)

**Taxes You
Paid**

(See
Instructions
on page 24.)

**Interest You
Paid**

(See
Instructions
on page 24.)

**Gifts to
Charity**

(See
Instructions
on page 25.)

**Casualty and
Theft Losses**

**Moving
Expenses**

**Job Expenses
and Most Other
Miscellaneous
Deductions**

(See page 26
for expenses to
deduct here.)

**Other
Miscellaneous
Deductions**

**Total Itemized
Deductions**

1 a Prescription medicines and drugs, insulin, doctors, dentists,
nurses, hospitals, medical insurance premiums you paid, etc.

b Other (list - include hearing aids, dentures, eyeglasses,
transportation and lodging, etc.) ▶

2 Add the amounts on lines 1a and 1b. Enter the total here

3 Multiply the amount on Form 1040, line 32, by 7.5% (.075)

4 Subtract line 3 from line 2. If zero or less, enter -0-. Total medical and dental

5 State and local income taxes

6 Real estate taxes

7 Other taxes (list - include personal property taxes) ▶

SEE STATEMENT A1
8 Add the amounts on lines 5 through 7. Enter the total here. Total taxes

9 a Deductible home mortgage interest (from Form 1098) that you paid
to financial institutions.
Report deductible points on line 10

b Other deductible home mortgage interest.

(If paid to an individual, show that person's
name and address.) ▶

10 Deductible points (See instructions for special rules)

11 Deductible investment interest (See page 25)

12 a Personal interest you paid (See page 25) 12a 1,622

b Multiply the amount on line 12a by 20% (.20). Enter the result

13 Add the amounts on lines 9a through 11, and 12b. Enter the total here. Total interest

14 Contributions by cash or check (if you gave \$3,000 or more to
any one organization, show to whom you gave and how much
you gave) ▶

15 Other than cash or check (You must attach Form 8283 if over \$500)

16 Carryover from prior year

17 Add the amounts on lines 14 through 16. Enter the total here. Total contributions

18 Casualty or theft loss(es) (attach Form 4684). (See page 26 of
the instructions)

19 Moving expenses (attach Form 3903 or 3903F). (See page 26
of the instructions)

20 Unreimbursed employee expenses - job travel, union dues, job
education, etc. (You MUST attach Form 2106 in some cases
See Instructions) ▶

21 Other expenses (investment, tax preparation, safe deposit box,
etc.). List type and amount ▶

SEE STATEMENT A1
22 Add the amounts on lines 20 and 21. Enter the total

23 Multiply the amount on Form 1040, line 32, by 2% (.02). Enter the
result here

24 Subtract line 23 from line 22. Enter the result. If zero or less, enter -0-.

25 Other (from list on page 26 of Instructions). List type and amount ▶

26 Add the amounts on lines 4, 8, 13, 17, 18, 19, 24 and 25. Enter the total here. Then
enter on Form 1040, line 34. - LARGER of this total or your standard deduction
from page 17 of the Instructions

Your social security number

Schedule B – Interest and Dividend Income

Attachment Sequence No. 00

If you received more than \$400 in taxable interest income, you must complete Parts I and III. List ALL interest received in Part I. If you received, as a nominee, interest that actually belong to another person, or you received or paid accrued interest on securities transferred between interest payment dates, see page 27.

Interest income

Amount

- 1 Interest income from seller-financed mortgages. (See instructions and list name of payer) ▶
- 2 Other interest income (List name of payer) ▶
EQUITABLE LIFE ASSURANCE SOC
OCEAN NATIONAL BANK
PRES. & MRS. BUSH BLIND TRUST 52-6224648
WHITE HOUSE FEDERAL CR. UNION

Note: If you received a Form 1099-INT or Form 1099-DIV from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

3. Add the amounts on lines 1 and 2. Enter the total here and on Form 1040, line 8a.	3	17,412
--	---	--------

If you received more than \$400 in gross dividends and/or other distributions on stock, you must complete Parts II and III. If you received, as a nominee, dividends that actually belong to another person, see page 27.

Dividend income

Appendix

- 4 Dividend income (last name of payer - include on this line capital gain distributions, nontaxable distributions, etc.) PRES. & MRS. BUSH BLIND TRUST 52-6224648

Note: If you received a Form 1099-DIV from a brokerage firm, list the firm's name as the payer and enter the total dividends shown on that form.

- | | | |
|---|---|-------|
| 5. Add the amounts on line 4. Enter the total here. | 5 | 9,997 |
| 6. Capital gain distributions. Enter here and on Schedule D.* | 6 | |
| 7. Nontaxable distributions. (See the instructions for Form 1040, line 9.) | 7 | |
| 8. Add the amounts on lines 6 and 7. Enter the total here. | 8 | |
| 9. Subtract line 8 from line 5. Enter the result here and on Form 1040, line 9. | 9 | 9,997 |
- * If you received capital gain distributions but do not need Schedule D to report any other gains or losses, see the instructions for Form 1040, lines 13 and 14.

* If you received capital gain distributions but do not need Schedule D to report any other gains or losses, see the Instructions for Form 1040, lines 13 and 14.

If you received more than \$400 of interest or dividends, OR if you had a foreign account or were a grantor of, or a transferor to, a foreign trust, you must answer both questions in Part III.

Yes	No
-----	----

- 10a At any time during 1989, did you have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See page 27 of the Instructions for exceptions and filing requirements for Form TD F 90-22.1.)
- b If "Yes," enter the name of the foreign country: _____
- 11 Were you the grantor of, or transferor to, a foreign trust that existed during 1989, whether or not you have any beneficial interest in it? If "Yes," you may have to file Form 3520, 3520-A, or 926

For Paperwork Reduction Act Notice, see Form 1040 Instructions.

Schedule B (Form 1040) 1983

Schedule D (Form 1040) 1989

Name(s) as shown on Form 1040. (Do not enter name and social security number if shown on other side.)

Your social security number

GEORGE H.W. & BARBARA P. BUSH**Part III Summary of Parts I and II**

18	Combine lines 8 and 17, and enter the net gain or (loss) here. If result is a gain, stop here and also enter the gain on Form 1040, line 13. If the result is a (loss), go on to line 19.	18	36,068
19	If line 18 is a (loss), enter here and as a (loss) on Form 1040, line 13, the smaller of:		
a	The (loss) on line 18; or		
b	(\$3,000) or, if married filing a separate return, (\$1,500).	19	
Note: When figuring which amount is smaller, treat them as if they were positive numbers.			
Go on to Part IV if the loss on line 18 is more than \$3,000 (\$1,500, if married filing a separate return). OR if taxable income on Form 1040, line 37, is zero.			

Part IV Figure Your Capital Loss Carryovers From 1989 to 1990**Section A. -- Figure Your Carryover Limit**

20	Enter taxable income or loss from Form 1040, line 37. (If Form 1040, line 37, is zero, see the Instructions for the amount to enter.)	20	
21	Enter the loss shown on line 19.	21	
22	Enter the amount shown on Form 1040, line 38.	22	
23	Combine lines 20, 21, and 22. If zero or less, enter zero.	23	
24	Enter the smaller of line 21 or line 23.	24	

Section B. -- Figure Your Short-Term Capital Loss Carryover

(Complete this section only if there is a loss shown on line 8 and line 19. Otherwise, go on to Section C.)

25	Enter the loss shown on line 8.	25	
26	Enter the gain shown on line 17.	26	
27	Enter the amount shown on line 24.	27	
28	Add lines 26 and 27.	28	
29	Subtract line 28 from line 25. If zero or less, enter zero. This is your short-term capital loss carryover from 1989 to 1990.	29	

Section C. -- Figure Your Long-Term Capital Loss Carryover

(Complete this section only if there is a loss shown on line 17 and line 19.)

30	Enter the loss shown on line 17.	30	
31	Enter the gain shown on line 8.	31	
32	Enter the amount shown on line 24.	32	
33	Enter the amount shown on line 25.	33	
34	Subtract line 33 from line 32. If zero or less, enter zero.	34	
35	Add lines 31 and 34.	35	
36	Subtract line 35 from line 30. If zero or less, enter zero. This is your long-term capital loss carryover from 1989 to 1990.	36	

Part V Complete this Part Only if You Elect Out of the Installment Method and Report a Note or Other Obligation at Less Than Full Face Value

37	Check here if you elect out of the installment method.	
38	Enter the face amount of the note or other obligation.	
39	Enter the percentage of valuation of the note or other obligation.	

Part VI Reconcile Forms 1099-B For Bartering Transactions

(Complete this part if you received one or more Form(s) 1099-B or an equivalent substitute statement(s) reporting bartering income.)

Amount of bartering income from Form 1099-B or equivalent statement reported on form or schedule

40	Form 1040, line 22	40	
41	Schedule C (Form 1040)	41	
42	Schedule D (Form 1040)	42	
43	Schedule E (Form 1040)	43	
44	Schedule F (Form 1040)	44	
45	Other (identify) (If not taxable, indicate reason - attach additional sheets if necessary):	45	
46	Total (add lines 40 through 45).	46	

Note: The amount on line 46 should be the same as the total bartering income on all Forms 1099-B and equivalent statements received.

SCHEDULE E
(Form 1040)

Department of the Treasury
Internal Revenue Service

Supplemental Income Schedule

(From rents, royalties, partnerships, estates, trusts, REMICs, etc.)
▶ Attach to Form 1040 or Form 1041.
▶ See instructions for Schedule E (Form 1040).

OMB No. 1545-0074

1989

Attachment
Sequence No. 13

Name(s) as shown on return

Your social security number

GEORGE H.W. & BARBARA P. BUSH

Part I Income or Loss From Rentals and Royalties **Caution:** Your rental loss may be limited. See instructions.

		Yes		No	
1 Show kind and location of each rental property: A BOOK--LOOKING FORWARD		A			
B		B			
C		C			
2 For each rental property listed on line 1, did you or your family use it for personal purposes for more than the greater of 14 days or 10% of the total days rented at fair rental value during the tax year?		A			
		B			
		C			
3 For each rental real estate property listed on line 1, did you actively participate in its operation during the tax year? (See instructions)		A			
		B			
		C			

Rental and Royalty Income		Properties			D Totals	
		A	B	C	(Add columns A, B, and C)	
4 Rents received					4	
5 Royalties received		28,563			5	28,563
Rental and Royalty Expenses						
6 Advertising	6					
7 Auto and travel	7					
8 Cleaning and maintenance	8					
9 Commissions	9	14,281				
10 Insurance	10					
11 Legal and other professional fees	11					
12 Mortgage interest paid to banks, etc. (see instructions)	12				12	
13 Other interest	13					
14 Repairs	14					
15 Supplies	15					
16 Taxes	16					
17 Utilities (see instructions)	17					
18 Wages and salaries	18					
19 Other (list) ▶	19					
20 Add lines 6 through 19	20	14,281			20	14,281
21 Depreciation expense or depletion (see instructions)	21				21	
22 Total expenses. Add lines 20 and 21	22	14,281				
23 Income or (loss) from rental or royalty properties. Subtract line 22 from line 4 (rents) or line 5 (royalties). If the result is a (loss), see instructions to find out if you must file Form 6198	23	14,282				
24 Deductible rental loss. Caution: Your rental loss on line 23 may be limited. See instructions to find out if you must file Form 6582	24					
25 Profits. Add rental and royalty profits from line 23. Enter the total income here	25					14,282
26 Losses. Add royalty losses from line 23 and rental losses from line 24. Enter the total losses here	26					
27 Combine amounts on lines 25 and 26, and enter the net income or (loss) here	27					14,282
28 Net farm rental income or (loss) from Form 4835. (Also complete line 43 on page 2.)	28					
29 Total rental or royalty income or (loss). Combine amounts on lines 27 and 28. Enter the result here. If Parts II, III, and IV on page 2 do not apply to you, enter the amount from line 29 on Form 1040, line 18. Otherwise, include the amount from line 29 in the total on line 42 on page 2	29					14,282

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule E (Form 1040) 1989

GEORGE H.W. & BARBARA P. BUSH

Note: If you report amounts from farming or fishing on Schedule E, you must include your gross income from those activities on line 43 below.

Part II Income or Loss from Partnerships and S Corporations

If you report a loss from an at-risk activity, you MUST check either column (e) or (f) to describe your investment in the activity. See Instructions.
If you check column (f), you must attach Form 8198.

30	(a) Name	(b) Enter P for partnership; S for S Corporation	(c) Check if foreign partnership	(d) Employer identification number	Investment at risk? (e) All is at risk (f) Some is at risk
A					
B					
C					
D					
E					

Passive Income and Loss		Nonpassive Income and Loss		
(g) Passive loss allowed from Form 8582	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Section 179 (see instructions for limits)	(k) Nonpassive income from Schedule K-1
A				
B				
C				
D				
E				
31 a Totals				
b Totals				
32 Add amounts in columns (h) and (k), line 31a. Enter total income here				32
33 Add amounts in columns (g), (i), and (j), line 31b. Enter total here				33
34 Total partnership and S corporation income or (loss). Combine amounts on lines 32 and 33. Enter the result here and include in the total on line 42 below				34

Part III Income or Loss from Estates and Trusts

35	(a) Name	(b) Employer identification number
A	PRES. & MRS. BUSH BLIND TRUST	52-6224648
B	ESTATE OF PRESCOTT S. BUSH	06-6154330
C		
Passive Income and Loss		Nonpassive Income and Loss
(c) Passive deduction or loss allowed from Form 8582	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1
A	181,669	
B		542
C		
36 a Totals	181,669	542
b Totals		
37 Add amounts in columns (d) and (f), line 36a. Enter total income here		37 182,211
38 Add amounts in columns (c) and (e), line 36b. Enter total here		38
39 Total estate and trust income or (loss). Combine amounts on lines 37 and 38. Enter the result here and include in the total on line 42 below		39 182,211

Part IV Income or Loss from Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

40	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules D, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules D, line 1b	(e) Income from Schedules D, line 3b
41 Combine columns (d) and (e) only. Enter the result here and include in line 42 below					41

Part V Summary of Parts I Through IV

42 TOTAL income or loss. Combine amounts on lines 29, 30, 37, 38, and 41. Enter the result here and on Form 1040, line 18		42 196,493
---	--	------------

Part VI Reconciliation of Farming and Fishing Income

43 Farmers and fishermen: Enter your gross farming and fishing income reported in Parts I, II, and III (see instructions)		43
---	--	----

Form 2210

Underpayment of Estimated Tax by Individuals and Fiduciaries

See separate instructions
Attach to Form 1040 or Form 1041

OMB No. 1545-0140

1989

Attachment
Sequence No. 44Department of the Treasury
Internal Revenue Service

Name(s) as shown on tax return

Identifying number

GEORGE H.W. & BARBARA P. BUSH

Note: In most cases, IRS can figure the penalty for you and you do not have to complete this form. See the separate instructions for more information.

Part I Figuring Your Underpayment

1	Enter your 1989 tax after credits (from Form 1040, line 47; or Form 1041, Schedule G, line 4)	1	101,382
2	Other taxes (see instructions)	2	
3	Add lines 1 and 2	3	101,382
4	Earned income credit	4	
5	Credit for Federal tax on fuels	5	
6	Add lines 4 and 5	6	
7	Subtract line 6 from line 3	7	101,382
8	Multiply line 7 by 90% (.90)	8	91,244
9	Withholding taxes from 1989 Form 1040, lines 56 and 60 (or Form 1041, line 24e). (Include any credit from Form 4469)	9	55,154
10	Subtract line 9 from line 7. If the result is less than \$500, do not complete or file this form. You do not owe the penalty	10	46,228
11	Enter your 1988 tax. (Caution: see instructions)	11	62,106
12	Enter the smaller of line 8 or line 11. If line 9 is equal to or more than line 12, do not complete or file this form. You do not owe the penalty.	12	62,106

Payment Due Dates

	(a) Apr. 15, 1989	(b) June 15, 1989	(c) Sept. 15, 1989	(d) Jan. 15, 1990
13 Divide line 12 by four (4) and enter the result in each column. However, if you use the annualized income installment method, complete the worksheet in the instructions and enter the amount from line 26 of that worksheet in each column of line 13. Also check this box <input type="checkbox"/> and attach a copy of the worksheet. Complete lines 14 through 21 for one column before completing the next column.	13 15,527	15,527	15,527	15,525
14 Estimated tax paid and tax withheld. (See instructions.) For column (a) only, also enter the amount from line 14 on line 18.	14 28,789	13,789	13,789	41,787
15 Enter amount, if any, from line 21 of previous column	15	13,262	11,524	9,786
16 Add lines 14 and 15	16	27,051	25,313	51,573
17 Add amounts on lines 19 and 20 of the previous column and enter the total	17			
18 Subtract line 17 from line 16. If zero or less, enter zero. For column (a) only, enter the amount from line 14	18 28,789	27,051	25,313	51,573
19 Remaining underpayment from previous period. If the amount on line 18 is zero, subtract line 16 from line 17 and enter the result. Otherwise, enter zero	19			
20 UNDERPAYMENT. If line 13 is more than or equal to line 18, subtract line 18 from line 13. Then go to line 14 of next column. Otherwise go to line 21	20			
21 OVERPAYMENT. If line 18 is more than line 13, subtract line 13 from line 18. Then go to line 14 of next column. Go to Part II on the back to figure the penalty	21 13,262	11,524	9,786	36,048

Part II Figuring the Penalty (Complete lines 23b - 24c of one column before completing the next column.)

		Payment Due Dates			
		(a) Apr. 15, 1989	(b) June 15, 1989	(c) Sept. 15, 1989	(d) Jan. 15, 1990
22	Underpayment from line 20, page 1	22			
Rate period 1 - 12% (April 15, 1989 - September 30, 1989)					
23a	Computation starting date for this period	23a	Apr. 15, 1989	June 15, 1989	Sept. 15, 1989
b	Number of days FROM the date on line 23a TO the date the amount on line 22 was paid or Sept. 30, 1989, whichever is earlier.	23b	Days:	Days:	Days:
c	Number of days on line 23b \times 12% x underpayment on line 22 (see instructions) \blacktriangleright	23c	\$	\$	\$
Rate period 2 - 11% (October 1, 1989 - April 15, 1990)					
24a	Computation starting date for this period	24a	Sept. 30, 1989	Sept. 30, 1989	Sept. 30, 1989
b	Number of days FROM the date on line 24a TO the date the amount on line 22 was paid or Apr. 15, 1990, whichever is earlier.	24b	Days:	Days:	Days:
c	Number of days on line 24b \times 11% x underpayment on line 22 (see instructions) \blacktriangleright	24c	\$	\$	\$
25	PENALTY. Add all amounts on lines 23c and 24c in all columns. Enter the total here and on Form 1040, line 68, or Form 1041, line 29, whichever applies	25	\$	NONE	

Form 2106

Employee Business Expenses

OMB No. 1545-0139

1989

Attachment
Sequence No. 54Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

▶ Attach to Form 1040.

Your Name

GEORGE H.W. BUSH

Social Security Number

Occupation in which expenses were incurred

PRESIDENT

Part I Employee Business Expenses

STEP 1 Enter Your Expenses	Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from Part II, line 28 or line 35	1	
2 Parking fees, tolls, and local transportation, including train, bus, etc.	2	
3 Travel expense while away from home, including lodging, airplane, car rental, etc. Do not include meals and entertainment.	3	402
4 Business expenses not included in lines 1 through 3. Do not include meals and entertainment.	4	
5 Meals and entertainment expenses. (See instructions.)	5	663
6 Add lines 1 through 5 and enter the total expenses here	6	402
		663

Note: If you were not reimbursed for any expenses in Step 1, skip lines 7-9 and enter the amount from line 6 on line 10.

STEP 2 Enter Amounts Your Employer Gave You For Expenses Listed In STEP 1.

(See the separate instructions for lines 7 and 8.)

7 Enter amounts your employer gave you that were not reported to you on Form W-2 (see instructions).	7	1,816		663
8 Enter amounts your employer gave you for expenses listed in Step 1 that were separately identified on Form W-2 as employee business expenses. (Do not include any amounts that were reported to you as wages in Box 10 of Form W-2.) (See instructions.)	8			
9 Add the amounts on lines 7 and 8. Enter the total here.	9	1,816		663

STEP 3 Figure Expenses To Deduct on Schedule A (Form 1040)

10 Subtract line 9 from line 6.	10	-1,414		
Note: If both columns of line 10 are zero, stop here. If Column A is less than zero, report the amount as income. See the separate instructions for how to report.				
11 Enter 20% (.20) of line 10, Column B.	11			
12 Subtract line 11 from line 10.	12	0		
13 Add the amounts on line 12 of both columns and enter the total here. Also enter the total on Schedule A (Form 1040), line 20. (Qualified performing artists and handicapped employees, see instructions for special rules on where to enter the total.)	13			

For Paperwork Reduction Act Notice, see instructions.

Form 2106 (1989)

Part II Vehicle Expenses (Use either your actual expenses (Section C) or the standard mileage rate (Section B).)
(Rural mail carriers, see page 1 of the separate instructions.)

Section A - General Information		Vehicle 1	Vehicle 2
14 Enter the date vehicle was placed in service	14		
15 Total mileage vehicle was used during 1988	15	miles	miles
16 Miles included on line 15 that vehicle was used for business	16	miles	miles
17 Percent of business use (divide line 16 by line 15)	17	%	%
18 Average daily round trip commuting distance	18	miles	miles
19 Miles included on line 15 that vehicle was used for commuting	19	miles	miles
20 Other personal mileage (add lines 16 and 19 and subtract the total from line 15)	20	miles	miles

- 21 Do you (or your spouse) have another vehicle available for personal purposes? ☐ Yes ☐ No
- 22 If your employer provided you with a vehicle, is personal use during off duty hours permitted? ☐ Yes ☐ No ☐ Not applicable
- 23a Do you have evidence to support your deduction? ☐ Yes ☐ No 23b If "Yes," is the evidence written? ☐ Yes ☐ No

Section B - Standard Mileage Rate (Do not use this section unless you own the vehicle.)

24 Enter the smaller of line 16, or 15,000 miles (Rural mail carriers, see instruction.)	24	miles
25 Subtract line 24 from line 16	25	miles
26 Multiply line 24 by $2 \frac{1}{2}$ (255) (See the separate instructions if vehicle is fully depreciated)	26	
27 Multiply line 25 by 11¢ (.11)	27	
28 Add lines 26 and 27. Enter total here and on Part I, line 1	28	

Section C - Actual Expenses

	Vehicle 1	Vehicle 2
29 Gasoline, oil, repairs, vehicle insurance, etc.	29	
30 Vehicle rentals	30	
31 Add lines 29 and 30	31	
32 Multiply line 31 by the percentage on line 17	32	
33 Depreciation from lines 36 and 37, column (f) (See separate instructions)	33	
34 Add lines 32 and 33. Enter total here and on line 1	34	
35 Value of employer-provided vehicle multiplied by the percentage on line 17 (See instructions)	35	

Section D - Depreciation of Vehicles (You can only claim depreciation for a vehicle you own. There is a limit on the amount of depreciation and Section 179 deduction you can claim. See the instructions for the limit. If line 17 above is 50 percent or less, you cannot claim the Section 179 deduction and you must figure depreciation using the straight line method over 5 years.)

	Cost or other basis (a)	Base for depreciation (Business use only - see instructions) (b)	Method of figuring depreciation (c)	Depreciation deduction (d)	Section 179 expense (e)	Total column (d) + column (e) (enter in Sec. C, line 34) (f)
36 Vehicle 1						
37 Vehicle 2						

STATEMENT A-1

===== STATE AND LOCAL TAXES PAID =====

STATE AND LOCAL INCOME TAXES	2,479
TOTAL STATE & LOCAL TAXES PAID	2,479 **
CARRIED TO SCHEDULE A, LINE 5	

===== OTHER TAXES EXPENSE =====

PERSONAL PROPERTY TAXES	207
TOTAL OTHER TAXES EXPENSE	207 **
CARRIED TO SCHEDULE A, LINE 7	

===== PERSONAL INTEREST EXPENSE =====

PERSONAL INTEREST	1,622
TOTAL PERSONAL INTEREST EXPENSE	1,622 **
CARRIED TO SCHEDULE A, LINE 12A	

===== CASH CONTRIBUTIONS - 50 PCT. LIMIT =====

VARIOUS ORGANIZED CHARITIES	37,272
FROM ESTATE/TRUST 52-6224648	594
TOTAL	37,866 **
INCLUDED IN SCH. A, LINE 14	

===== MISCELLANEOUS DEDUCTIONS SUBJECT TO 2% FLOOR =====

SALARY	8,000
PAYROLL TAXES-EMPLOYEE	628
OFFICE SUPPLIES/MISC EXPENSE	282
FED EXP CHGS RE TAX INFORMATION	39
CLUBS-CHRISTMAS GIFT FUNDS	50
LEGAL FEES-TAX ADVICE/OTHER MATTERS	20,492
FEES & SEC. 212 EXP THROUGH PRESIDENT AND MRS. GEORGE BUSH QUALIFIED BLIND TRUST	8,397
TAX PREPARATION FEES	1,600
MOVING EXPENSE--BUSINESS PORTION	3,856
INV EXP RE HOLLYWOOD LPG NO.2	40
IRA CUSTODY FEE	50
TOTAL MISC. DEDNS. SUBJECT TO LIMIT	43,434 **
CARRIED TO SCHEDULE A, LINE 14	

GEORGE H.W. & BARBARA P. BUSH

===== SUMMARY OF RENTS AND ROYALTIES =====

PROPERTY NO.	GROSS INCOME	DEPLETION, DEPRECIATION	OTHER EXPENSE	NET LOSS	NET PROFIT
NO. 1 T (royalty)	28,563		14,281		14,282
TOTALS:	28,563		14,281		

SCH. E, LINE 25: TOTAL FROM PROPERTIES WITH PROFITS 14,282

SCH. E, LINE 26: TOTAL FROM PROPERTIES WITH LOSSES 0

996
GEORGE H.W. & BARBARA P. BUSH

===== STATEMENT OF WAGES AND SALARY INCOME =====

T/S	NAME OF EMPLOYER	GROSS WAGES	FICA TAX WITHHELD	FED. TAX WITHHELD
T	THE WHITE HOUSE	189,167	3,605	53,275
T	UNITED STATES SENATE	6,229	468	1,411
T	EXCESS REIMBURSEMENT - FORM 2106	1,414		

TOTALS	196,810	4,073	54,686
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EXCESS FICA - TAXPAYER	468
------------------------	-----

1 Control number		OMB No. 1545-0008	
2 Employer's name, address, and ZIP code The White House Office of Administration Financial Management Division Room 4005, HEOB, 725 17th Street, NW Washington, D.C. 20503		3 Employer's identification number	4 Employer's state ID number
5 Statutory employee	6 Deceased	7 Pension plan	8 Legal rep.
9 947 emp.	10 Subtotal	11 Deferred compensation	12 Void
6 Allocated tips		7 Advance EIC payment	
8 Employee's social security number	9 Federal income tax withheld \$53,274.64	10 Wages, tips, other compensation \$189,166.67	11 Social security tax withheld \$3,604.80
12 Employee's name, address, and ZIP code George H. W. Bush The White House Washington, D.C. 20500		13 Social security wages \$48,000.00	14 Social security tips
		15	16a Fringe benefits incl. in Box 10
17 State income tax		18 State wages, tips, etc.	19 Name of state
20 Local income tax		21 Local wages, tips, etc.	22 Name of locality

Form W-2 Wage and Tax Statement 1989
This information is being furnished to the Internal Revenue Service.

Copy B To be filed with employee's FEDERAL tax return

Dept. of the Treasury - IRS

53-6002558 UNITED STATES SENATE DISBURSING OFFICE ROOM SH-127 HART SENATE OFFICE BLDG. WASHINGTON, D.C. 20510-7104		WAGE AND TAX STATEMENT - 1989 Copy B To be filed with employee's FEDERAL tax return Employee's State identifying number	
1 Employee's social security number	2 Federal income tax withheld 1,411.18	3 Wages, tips, and other compensation 6,229.15	4 Social Security employee tax withheld 467.80
		5 Total Social Security wages 6,229.15	
6 GEORGE BUSH UNITED STATES SENATE WASHINGTON DC 20510		7 State of local wages 8 State of local wages 9 State of locality	
Type or print EMPLOYEE'S name, address, and ZIP code above		10 State of local wages 11 State of local wages 12 State of locality	

GEORGE H. W. AND BARBARA P. BUSH
1989 CHARITABLE CONTRIBUTIONS

Ducks Unlimited Foundation Long Grove, IL	\$ 200
The Nature Conservancy Arlington, VA	50
1st Congregational Church Kennebunkport, ME	500
St. Ann's Episcopal Church Kennebunkport, ME	100
St. Martin's Episcopal Church Houston, TX	600
Episcopal Church Foundation New York, NY	250
Clarke Foundation for the Deaf Northampton, MA	100
St. John's Church Washington, DC	100
Alcorn State Development Lorman, MS	1,000
River Tree Arts Kennebunkport, ME	50
Commonwealth of Puerto Rico Ayuda Pro Damnificados de Hurraacan Hugo San Juan, Puerto Rico	1,000
South Carolina Hugo Relief Fund Columbia, SC	1,000
American Red Cross Virgin Island Chapter Washington, DC	1,000
Black Student Fund Washington, DC	500

GEORGE H. W. AND BARBARA P. BUSH
1989 CHARITABLE CONTRIBUTIONS
(Continued)

The Living Bank Houston, TX	\$ 150
The DeBakey Medical Foundation Houston, TX	500
Sloan-Kettering Institute for Cancer Research Cancer Center New York, NY	800
Leukemia Society Houston, TX	100
United Way Biddeford, ME	300
American Red Cross San Francisco, CA	1,000
Trustees of Phillips Academy Andover, MA	1,500
American Red Cross Santa Cruz, CA	500
United Negro College Fund New York, NY	8,141
M. D. Anderson Cancer Center Houston, TX	7,141
Kennebunkport Conservation Trust Kennebunkport, ME	100
Yale University New Haven, CT	
Alumni	400
Class of 1948	40
Camp David Chapel Fund Chambersburg, PA	5,000

GEORGE H. W. AND BARBARA P. BUSH
1989 CHARITABLE CONTRIBUTIONS
(Continued)

Maine Medical Center Portland, ME	\$ 100
Morehouse School of Medicine Atlanta, GA	1,000
American Red Cross Oakland, CA	1,000
Philosophical Society of Texas Austin, TX	50
Portland Museum of Art Portland, ME	100
United Way Houston, TX	1,000
Combined Federal Campaign Washington, DC	1,000
Star of Hope Mission Houston, TX	300
Salvation Army Houston, TX	300
Ashley Hall Foundation Charleston, SC	100
Kennebunkport Village Fire Co. Kennebunkport, ME	100
Sweetser Childrens Home Saco, ME	100
SUB-TOTAL	37,272
Through President and Mrs. George Bush Qualified Blind Trust	594
TOTAL	<u>\$37,866</u>

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

April 12, 1990

STATEMENT BY THE PRESS SECRETARY

Under Section 212 of the U.S. Tax Code, the President is allowed to deduct the \$8,000 salary as listed under the Miscellaneous Deductions box on Statement A-1 of his 1989 Tax Return. This deduction has been part of the President's tax returns for the past eight years and has been subject to annual Internal Revenue Service audits over that time.

H H H

16c 97-2973
(31 pages)

THE WHITE HOUSE
Office of the Press Secretary

For Immediate Release

April 15, 1991

STATEMENT BY THE PRESS SECRETARY

The President and Mrs. Bush's 1990 tax return shows that they have paid \$99,241 in Federal Income Tax on an Adjusted Gross Income of \$452,732 of which \$200,000 was the President's salary.

The Bushes also reported \$245,911 in income from their Blind Trust, \$1,245 in interest income and \$8,647 from other sources. The Blind Trust is managed by Bessemer Trust Company, N.A., New York City.

The President and Mrs. Bush claimed \$97,118 in itemized deductions, which included \$38,667 in contributions to 50 charities and \$330 to charities through the Blind Trust. A list of the 50 charities is attached. The net royalties received in 1990 of \$7,042 from the President's book, Looking Forward, were given to charitable organizations included in this list.

The President and Mrs. Bush's tax return has been reviewed by the Office of Government Ethics and will be filed in the Philadelphia Regional Office of the Internal Revenue Service.

Label		For the year Jan. - Dec. 31, 1990, or other tax year beginning 1990, ending		19		OMB No. 1545-0074		
(See instructions on page 4.)	Your first name and initial	Last name		Your social security number				
	GEORGE H.W.	BUSH						
Use IRS label. Otherwise please print or type.	Spouse's first name and initial	Last name		Spouse's social security number				
	BARBARA P.	BUSH						
Presidential Election Campaign (See page 8)	C/O BESSEMER TRUST COMPANY, N.A. 630 FIFTH AVENUE-TAX DEPT NEW YORK NY 10111			For Privacy Act and Paperwork Reduction Act Notice, see instructions.				
	Do you want \$1 to go to this fund? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Note: Checking "Yes" will not change your tax or reduce your refund.				
If joint return, does your spouse want \$1 to go to this fund?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
Filing Status (See page 10)	1	Single (See page 10 to find out if you can file as head of household.)						
	2	<input checked="" type="checkbox"/>	Married filing joint return (even if only one had income)					
	3	<input type="checkbox"/>	Married filing separate return. Enter spouse's social security no. above and full name here.					
	4	<input type="checkbox"/>	Head of household (with qualifying person). (See page 10.) If the qualifying person is your child but not your dependent, enter this child's name here.					
	5	<input type="checkbox"/>	Qualifying widow(er) with dependent child (your spouse died \geq 19). (See page 10.)					
Exemptions (See instructions on page 10.)	6a	<input checked="" type="checkbox"/>	Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 33b on page 2.				No. of boxes checked on 6a and 6b <u>2</u>	
	b	<input checked="" type="checkbox"/>	Spouse					
If more than 7 dependents, see instructions on page 11.	c	Dependents	(1) Name (first, initial, and last name)	(2) Check if under age 2	(3) If age 2 or older, dependent's social security number	(4) Relationship	(5) No. of months lived in your home in 1990	No. of your children on dc who:
								• Lived with you
								• Didn't live with you due to divorce or separation (see page 11)
								No. of other dependents on dc
d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here.							Add numbers entered on lines above <u>2</u>	
e Total number of exemptions claimed								
Income (Attach Copy B of your Forms W-2, W-2G, and W-2P here. If you do not have a W-2, see page 8. Attach check or money order on top of any Forms W-2, W-2G, and W-2P.)	7	Wages, salaries, tips, etc. (attach Form(s) W-2.)					7	200,000
	8a	Taxable interest income (also attach Schedule B if over \$400)					8a	19,848
	b	Tax-exempt interest income (see pg. 13) DON'T include on line 8a					8b	2,069
	9	Dividend income (also attach Schedule B if over \$400)					9	10,162
	10	Taxable refunds of state and local income taxes, if any, from worksheet on page 14					10	
	11	Alimony received					11	
	12	Business income or (loss) (attach Schedule C)					12	
	13	Capital gain or (loss) (attach Schedule D)					13	-3,000
	14	Capital gain distributions not reported on line 13 (see page 14)					14	
	15	Other gains or (losses) (attach Form 4797)					15	
	16a	Total IRA distributions					16a	
	16b	Taxable amount (see page 14)					16b	
	17a	Total pensions and annuities					17a	
	17b	Taxable amount (see page 14)					17b	
	18	Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)					18	224,793
19	Farm income or (loss) (attach Schedule F)					19		
20	Unemployment compensation (insurance) (see page 16)					20		
21a	Social security benefits					21a		
21b	Taxable amount (see page 16)					21b		
22	Other income (list type and amount - see page 16)					22	1,000	
23	Add the amounts shown in the fourth column for lines 7 through 22. This is your total income					23	452,803	
Adjustments to income (See instructions on page 17.)	24a	Your IRA deduction, from applicable worksheet on page 17 or 18					24a	
	b	Spouse's IRA deduction, from applicable worksheet on page 17 or 18					24b	
	25	One-half of self-employment tax (see page 18)					25	71
	26	Self-employed health insurance deduction, from worksheet on page 13					26	
	27	Keogh retirement plan and self-employed SEP deduction					27	
	28	Penalty on early withdrawal of savings					28	
	29	Alimony paid. Recipient's SSN					29	
30	Add lines 24a through 29. These are your total adjustments.					30	71	
Adjusted Gross Income	31	Subtract line 30 from line 23. This is your adjusted gross income. If this amount is less than \$20,284 and a child lived with you, see page 23 to find out if you can claim the "Earned Income Credit" on line 57.					31	452,732

Power of Attorney and Declaration of Representative

91-2973
OMB No. 1545-0150
Expires 12-31-90

Department of the Treasury
Internal Revenue Service

See separate instructions.

Part I Power of Attorney		For IRS Use Only	
(Please type or print)	Taxpayer(s) name(s) George H.W. Bush Barbara P. Bush	Taxpayer identification number	File No. Level Receipt
	Address (number and street) The White House	Plan number (if applicable)	Powers Blind T.
	City, state, and ZIP code Washington, D.C. 20500	Telephone number (202) 456-1414	Action Ret. Ind.

hereby appoint(s) the following individual(s)*

Name	CAF Number	Address	Telephone Number
See Appendix A, attached			

as attorney(s)-in-fact to represent the taxpayer(s) before any office of the Internal Revenue Service for the following tax matter(s) (specify the type(s) of tax and year(s) or period(s) (date of death if estate tax)):

Type of tax (Individual, corporate, etc.)	Federal tax form number (1040, 1120, etc.)	Year(s) or period(s) (Date of death if estate tax)
Individual Income Tax	1040	1990
Individual Declaration of Estimated Tax	1040-ES	1991

The attorney(s)-in-fact (or either of them) are authorized, subject to revocation, to receive confidential information and to perform any and all acts that the principal(s) can perform with respect to the above specified tax matters (including use of power of attorney to receive and

and specifically to perform those acts specified on Appendix B hereto.

- ☐ Send originals of all notices and all other written communications in proceedings involving the above tax matters to the appointee first named above, and a duplicate copy of all notices and all other written communications to the taxpayer named above, or
- ☒ Send copies of all notices and all other written communications addressed to the taxpayer(s) in proceedings involving the above tax matters to:
- ☐ the appointee first named above, or
 - ☒ (names of not more than two of the appointees named above) both of the appointees named above.

Initial here ☒ if you are granting the power to receive, but not to endorse or cash, refund checks for the above tax matters to:

- ☒ the appointee first named above, or
- ☐ (name of one of the above designated appointees) _____

This power of attorney revokes all earlier powers of attorney and tax information authorizations on file with the Internal Revenue Service for the same tax matters and years or periods covered by this power of attorney, except the following:

(Specify to whom granted, date, and address including ZIP code, or refer to attached copies of earlier powers and authorizations.)

Signature of or for taxpayer(s)
(If signed by a corporate officer, partner, or fiduciary on behalf of the taxpayer, I certify that I have the authority to execute this power of attorney on behalf of the taxpayer.)

1. George H.W. Bush (Signature) (Title, if applicable) 3-7-91 (Date)
(Also type or print your name below if signing for a taxpayer who is not an individual)

2. Barbara P. Bush (Signature) (Title, if applicable) 3-7-91 (Date)

91 - 2973

APPENDIX A

<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>
Mr. John R. Whitmore	Bessemer Trust Company, NA 630 Fifth Avenue New York, NY 10111	212-708-9111
Mr. G. William Clapp	Bessemer Trust Company, NA 630 Fifth Avenue New York, NY 10111	212-708-9269

APPENDIX B

1. Prepare, sign and file return.
2. Receive, but not endorse or cash, refund checks for the above tax matters.
3. Execute waivers (including offers of waivers) of restrictions on assessment or collection of deficiencies in tax and waivers of notice of disallowance of a claim for credit or refund.
4. To execute consents extending the statutory period of assessment or collection of taxes.
5. Execute closing agreements under section 7121 of the Internal Revenue Code.

Internal Revenue Service

Department of the Treasury

District
Director

91-2963

The President and Mrs. George P. W. Bush
The White House
Washington, D.C. 20500

MAR 22 1991

Dear Mr. President and Mrs. Bush:

This is in response to your letter dated March 18, 1991, requesting permission to have your 1990 income tax return and your Declaration of Estimated Tax for 1991 made by a trustee pursuant to section 1.6012-1(a)(5) of the Income Tax Regulations. You indicate that a trust agreement with Bessemer Trust Company qualifies as a blind trust that meets the requirements of section 202(f)(1)(B) of the Ethics in Government Act of 1978.

This letter will serve as approval of your request and will permit the trustee to make your 1990 individual income tax return and the Declaration of Estimated Tax for 1991. The trustee must submit with your tax return and with the Declaration of Estimated Tax a copy of this letter and a power of attorney (or copy thereof). The power of attorney must grant the trustee authority to sign your return, to receive a refund check, to execute a waiver of notice of restrictions on assessment or collection, to execute a waiver of notice of disallowance, to execute a consent to extend the period of assessment or collection, and to execute a closing agreement. A Form 2848, Power of Attorney and Declaration of Representative, when properly completed, is sufficient. We have enclosed a blank Form 2848 for your convenience.

In order to maintain proper controls and security over your tax return, we ask that the trustee use the following specific address:

PERSONAL ATTENTION
Joseph H. Cloonan, Director
Philadelphia Service Center
P. O. Box 69
Bensalem, PA 19020

If you have any questions, please call me at (713) 653-3704 in Houston or call Mr. Cloonan at (215) 969-2221.

Respectfully,

Arturo A. Jacobs

Arturo A. Jacobs
District Director

Enclosure:
Form 2848

Tax Computation

If you want IRS to figure your tax, see instructions on page 18.

32	Amount from line 31 (adjusted gross income)	32	452,732
33a	Check if: <input checked="" type="checkbox"/> You were 65 or older <input type="checkbox"/> Blind; <input checked="" type="checkbox"/> Spouse was 65 or older <input type="checkbox"/> Blind. Add the number of boxes checked above and enter the total here	33a	2
b	If your parent (or someone else) can claim you as a dependent, check here	33b	
c	If you are married filing a separate return and your spouse itemizes deductions, or you are a dual-status alien, see page 18 and check here	33c	
34	Enter the larger of: <ul style="list-style-type: none"> Your standard deduction (from the chart (or worksheet) on page 20 that applies to you), OR Your itemized deductions (from Schedule A, line 27). If you itemize, attach Schedule A and check here <input checked="" type="checkbox"/> 	34	97,118
35	Subtract line 34 from line 32	35	355,614
36	Multiply \$2,050 by the total number of exemptions claimed on line 8a	36	4,100
37	Taxable income. Subtract line 36 from line 35. (If line 36 is more than line 35, enter -0-)	37	351,514
38	Enter tax. Check if from: a <input type="checkbox"/> Tax Table, b <input checked="" type="checkbox"/> Tax Rate Schedules, or c <input type="checkbox"/> Form 8815 (See pg. 21). (If any is from Form(s) 8814, enter that amount here)	38	99,572
39	Additional taxes (see page 21). Check if from: a <input type="checkbox"/> Form 4670, or b <input type="checkbox"/> Form 4672	39	
40	Add lines 38 and 39	40	99,572

Credits

(See instructions on page 21.)

41	Credit for child and dependent care expenses (attach Form 2441)	41	
42	Credit for the elderly or the disabled (attach Schedule R)	42	
43	Foreign tax credit (attach Form 1116)	43	472
44	General business credit. Check if from: <ul style="list-style-type: none"> <input type="checkbox"/> Form 3800 or <input type="checkbox"/> Form (specify) 	44	
45	Credit for prior year minimum tax (attach Form 8801)	45	
46	Add lines 41 through 45	46	472
47	Subtract line 46 from line 40. (If line 46 is more than line 40, enter -0-)	47	99,100

Other Taxes

48	Self-employment tax (attach Schedule SE)	48	141
49	Alternative minimum tax (attach Form 6251)	49	
50	Recapture taxes (see page 22). Check if from: a <input type="checkbox"/> Form 4255, b <input type="checkbox"/> Form 8611	50	
51	Social security tax on tip income not reported to employer (attach Form 4137)	51	
52	Tax on an IRA or a qualified retirement plan (attach Form 5329)	52	
53	Advance earned income credit payments from Form W-2	53	
54	Add lines 47 through 53. This is your total tax	54	99,241

Payments

Attach Forms W-2, W-2G, and W-2P to front.

55	Federal income tax withheld (if any is from Form(s) 1099, check <input type="checkbox"/>)	55	61,370
56	1989 estimated tax payments & amount applied from 1988 return	56	52,000
57	Earned income credit (see page 23)	57	
58	Amount paid with Form 4868 (extension request)	58	
59	Excess social security tax and RRTA tax withheld (see page 24)	59	
60	Credit for Federal tax on fuels (attach Form 4136)	60	
61	Regulated investment company credit (attach Form 2438)	61	
62	Add lines 55 through 61. These are your total payments	62	113,370

Refund or Amount You Owe

63	If line 62 is more than line 54, enter amount OVERPAID	63	14,129
64	Amount of line 63 to be REFUNDED TO YOU	64	4,129
65	Amount of line 62 to be APPLIED TO YOUR 1991 ESTIMATED TAX	65	10,000
66	If line 54 is more than line 62, enter AMOUNT YOU OWE. Attach check or money order for full amount payable to "Internal Revenue Service." Write your name, social security number, address, daytime phone number, and "1990 Form 1040" on it	66	
67	Estimated tax penalty (see page 25)	67	

Sign Here

(Keep a copy of this return for your records.)

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	
Your signature <i>George H. W. Bush</i> Date 4/9/91	Your occupation PRESIDENT Spouse's occupation HOUSEWIFE
Preparer's signature <i>John R. Williams</i> Date 4/9/91	Check if self-employed <input type="checkbox"/>
Firm's name (or yours, if self-employed) and address BESSEMER TRUST CO., N.A. 630 FIFTH AVENUE NEW YORK NY	Preparer's social security no. E. I. No. ZIP code 10111

SCHEDULE A
(Form 1040)

Department of the Treasury
Internal Revenue Service

Itemized Deductions

▶ Attach to Form 1040

▶ See Instructions for Schedule A (Form 1040)

91-2973

OMB No. 1545-0047

1990

Tax Form
Publication No. 07

Name(s) as shown on Form 1040

Your social security number

GEORGE H.W. & BARBARA P. BUSH

Medical and Dental Expenses	Caution: Do not include expenses reimbursed or paid by others.	1			
	1 Medical and dental expenses (See page 27 of the instructions).	1			
	2 Enter amount from Form 1040, line 32.	2	2		
	3 Multiply the amount on line 2 by 7.5% (.075). Enter the result.	3			
	4 Subtract line 3 from line 2. Enter the result. If less than zero, enter -0-	4			
Taxes You Paid	5 State and local income taxes	5	3,596		
	6 Real estate taxes	6	26,468		
	7 Other taxes (list - include personal property taxes) ▶	7	156		
(See Instructions on page 27.)	SEE STATEMENT A1	7	156		
	8 Add the amounts on lines 5 through 7. Enter the total.	8	30,220		
Interest You Paid	9 a Deductible home mortgage interest paid to financial institutions and reported to you on Form 1068. Report deductible points on line 10.	9a			
	b Other deductible home mortgage interest. (If paid to an individual, show that person's name and address.) ▶	9b			
(See Instructions on page 27.)	10 Deductible points (See instructions for special rules)	10			
	11 Deductible investment interest (attach Form 4952 if required) (See page 28.)	11			
	12 a Personal interest you paid. (See page 28)	12a	41		
	b Multiply the amount on line 12a by 10% (.10). Enter the result	12b	4		
	13 Add the amounts on lines 9a through 11, and 12b. Enter the total.	13	4		
Gifts to Charity	Caution: If you made a charitable contribution and received a benefit in return, see page 29 of the instructions.				
	14 Contributions by cash or check	14	38,997		
(See Instructions on page 29.)	15 Other than cash or check (You MUST attach Form 8283 if over \$500)	15			
	16 Carryover from prior year	16			
	17 Add the amounts on lines 14 through 16. Enter the total.	17	38,997		
Casualty and Theft Losses	18 Casualty or theft loss(es). (attach Form 4634). (See page 29 of the instructions)	18			
Moving Expenses	19 Moving expenses (attach Form 3903 or 3903F). (See page 30 of the instructions)	19			
Job Expenses and Most Other Miscellaneous Deductions	20 Unreimbursed employee expenses - job travel, union dues, job education, etc. (You MUST attach Form 2106 if required. See instructions.) ▶	20			
(See Instructions on page 30 for expenses to deduct here.)	21 Other expenses (investment, tax preparation, safe deposit box, etc.). List type and amount ▶	21	36,952		
	SEE STATEMENT A1	21	36,952		
	22 Add the amounts on lines 20 and 21. Enter the total	22	36,952		
	23 Enter amount from Form 1040, line 32.	23	452,732		
	24 Multiply the amount on line 23 by 2% (.02). Enter the result.	24	9,055		
	25 Subtract line 24 from line 22. Enter the result. If less than zero, enter -0-	25	27,897		
Other Miscellaneous Deductions	26 Other (from list on page 30 of instructions). List type and amount ▶	26			
Total Itemized Deductions	27 Add the amounts on lines 4, 8, 13, 17, 18, 19, 25 and 26. Enter the total here. Then enter on Form 1040, line 34, the LARGER of this total or your standard deduction from page 20 of the instructions.	27	97,113		

For Paperwork Reduction Act Notice, see Form 1040 Instructions

Schedule A (Form 1040) 1990

GEORGE H.W. & BARBARA P. BUSH

91-2972

Schedule B – Interest and Dividend Income

Attachment Sequence No. 08

Part I Interest Income

(See
Instructions
on pages 13
and 30.)

If you received more than \$400 in taxable interest income, or you are claiming the exclusion of interest from Series EE U.S. savings bonds issued after 1989 (see page 31), you must complete Part I. List ALL interest received in Part I. If you received more than \$400 in taxable interest income, you must also complete Part III. If you received, as a nominee, interest that actually belongs to another person, or you received or paid accrued interest on securities transferred between interest payment dates, see page 31.

Interest Income

Interest Income		Amount
1 Interest income. (List name of payer - If any interest income is from seller-financed mortgages, see instructions and list this interest first.)		
EQUITABLE LIFE ASSURANCE SOC		455
OCEAN NATIONAL BANK		712
PRES. & MRS. BUSH BLIND TRUST 52-6224648		12,039
PRES. & MRS. BUSH BLIND TRUST 52-6224648		6,564
WHITE HOUSE FEDERAL CR. UNION		78
	1	
2 Add the amounts on line 1. Enter the total.	2	19,848
3 Enter the excludable savings bond interest, if any, from Form 8815, line 14. Attach Form 8815 to Form 1040.	3	
4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a.	4	19,848

Note: If you received a Form 1099-INT or Form 1099-OID or substitute statement, from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

Part II Dividend Income

[See
Instructions on
pages 13 and
31.]

If you received more than \$400 in gross dividends and/or other distributions on stock, you must complete Parts II and III. If you received, as a nominee, dividends that actually belong to another person, see page 31.

Dividend Income

Dividend income			Amount	
5	Dividend income (List name of payer - include on this line capital gain distributions, nontaxable distributions, etc.) ▶ <u>PRES. & MRS. BUSH BLIND TRUST 52-6224648</u> _____ _____ _____ _____ _____ _____ _____ _____ _____		10.162	
6	Add the amounts on line 5. Enter the total here	6	10.162	
7	Capital gain distributions. Enter here and on Schedule D *	7		
8	Nontaxable distributions. (See the instructions for Form 1040, line 8.).	8		
9	Add the amounts on lines 7 and 8. Enter the total	9		
10	Subtract line 9 from line 6. Enter the result here and on Form 1040, line 9. ▶	10	10.162	

Note: If you received a Form 1099-DIV, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total dividends shown on that form.

* If you received capital gain distributions but do not need Schedule D to report any other gains or losses, see the instructions for Form 1040, lines 13 and 14.

Part III Foreign Accounts and Foreign Trusts

(See
Instructions
on page 31.)

If you received more than \$400 of interest or dividends, OR if you had a foreign account or were a grantor of, or a transferor to, a foreign trust, you must answer both questions in Part III.

11a. At any time during 1990, did you have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See page 31 of the instructions for exceptions and filing requirements for Form TD F 90-22.1.)

12 Were you the grantor of, or transferor to, a foreign trust that existed during 1990, whether or not you have any beneficial interest in it? If "Yes," you may have to file Form 3520, 3520-A, or 928

Yes	No
-----	----

Key



15

1954

Name(s) as shown on Form 1040. (Do not enter name and social security number if shown on other side.)

Your social security number

GEORGE H.W. & BARBARA P. BUSH

Part III Summary of Parts I and II

18	Combine lines 8 and 17, and enter the net gain or (loss) here. If result is a gain, stop here and enter the gain on Form 1040, line 13.	18	-11,822
19	If line 18 is a (loss), enter here and as a (loss) on Form 1040, line 13, the smaller of: a The (loss) on line 18; or b (\$3,000) or, if married filing a separate return, (\$1,500).	19	-3,000
Note: When figuring whether 19a or 19b is smaller, treat both numbers as if they are positive.			
Go on to Part IV if the loss on line 18 is more than \$3,000 (\$1,500, if married filing a separate return), OR, if taxable income on Form 1040, line 37, is zero.			

Part IV Capital Loss Carryovers From 1990 to 1991**Section A -- Carryover Limit**

20	Enter taxable income or loss from Form 1040, line 37. (If Form 1040, line 37, is zero, see instructions for amount to enter.)	20	351,514
Note: For lines 21 through 36, enter all amounts as positive numbers.			
21	Enter the loss on line 19.	21	3,000
22	Enter the amount on Form 1040, line 36.	22	4,100
23	Combine lines 20, 21, and 22. If zero or less, enter -0-.	23	358,614
24	Carryover Limit. Enter the smaller of line 21 or line 23.	24	3,000

Section B -- Short-Term Capital Loss Carryover to 1991

(Complete this section only if there is a loss on both line 8 and line 19. Otherwise, go on to Section C.)

25	Enter the loss on line 8.	25	19,170
26	Enter the gain, if any, on line 17.	26	7,348
27	Enter the amount on line 24.	27	3,000
28	Add lines 26 and 27.	28	10,348
29	Short-term capital loss carryover to 1991. Subtract line 28 from line 25. If zero or less, enter -0-.	29	8,822

Section C -- Long-Term Capital Loss Carryover to 1991

(Complete this section only if there is a loss on line 17 and line 19.)

30	Enter the loss on line 17.	30	
31	Enter the gain, if any, on line 8.	31	
32	Enter the amount on line 24.	32	
33	Enter the amount, if any, on line 25.	33	
34	Subtract line 33 from line 32. If zero or less, enter -0-.	34	0
35	Add lines 31 and 34.	35	
36	Long-term capital loss carryover to 1991. Subtract line 35 from line 30. If zero or less, enter -0-.	36	0

Part V Election Not to Use the Installment Method

(Complete this part only if you elect out of the installment method and report a note or other obligation at less than full face value.)

37	Check here if you elect out of the installment method.	<input type="checkbox"/>
38	Enter the face amount of the note or other obligation.	
39	Enter the percentage of valuation of the note or other obligation.	

Part VI Reconciliation of Forms 1099-B For Bartering Transactions

(Complete this part if you received one or more Form 1099-B or substitute statements reporting bartering income.)

Amount of bartering income from Form 1099-B or substitute statement reported on form or schedule

40	Form 1040, line 22	40	
41	Schedule C (Form 1040)	41	
42	Schedule D (Form 1040)	42	
43	Schedule E (Form 1040)	43	
44	Schedule F (Form 1040)	44	
45	Other form or schedule (identify): (If not taxable, indicate reason - attach additional sheets if necessary).	45	
46	Total (add lines 40 through 45).	46	

Note: The amount on line 46 should be the same as the total bartering income on all Forms 1099-B and substitute statements received for bartering transactions.

**SCHEDULE E
(Form 1040)**

Department of the Treasury
Internal Revenue Service

Supplemental Income Schedule

(From rents, royalties, partnerships, estates, trusts, REMICs, etc.)
▶ Attach to Form 1040 or Form 1041.
▶ See instructions for Schedule E (Form 1040).

91-2973

1990

Attachment
Sequence No. 13

Name(s) as shown on return

Your social security number

GEORGE H.W. & BARBARA P. BUSH

Part I Income or Loss From Rentals and Royalties Note: Report farm rental income or loss from Form 4835 on page 2, line 38

1 Show kind and location of each rental property:

A BOOK--LOOKING FORWARD

B _____
C _____

2 For each rental property listed on line 1, did you or your family use it for personal purposes for more than the greater of 14 days or 10% of the total days rented at fair rental value during the tax year? (See instructions.)

	Yes	No
A		
B		
C		

Rental and Royalty Income		Properties			D Totals (Add columns A, B, and C)
		A	B	C	
3 Rents received	3				3
4 Royalties received	4	14,084			4 14,084
Rental and Royalty Expenses					
5 Advertising	5				
6 Auto and travel	6				
7 Cleaning and maintenance	7				
8 Commissions	8	7,042			
9 Insurance	9				
10 Legal and other professional fees	10				
11 Mortgage interest paid to banks, etc. (see instructions)	11				11
12 Other interest	12				
13 Repairs	13				
14 Supplies	14				
15 Taxes	15				
16 Utilities (see instructions)	16				
17 Wages and salaries	17				
18 Other (list) p. _____ _____ _____	18				
19 Add lines 5 through 18	19	7,042			19 7,042
20 Depreciation expense or depletion (see instructions)	20				20
21 Total expenses. Add lines 19 and 20	21	7,042			
22 Income or (loss) from rental or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see instructions to find out if you must file Form 6198	22	7,042			
23 Deductible rental loss. Caution: Your rental loss on line 22 may be limited. See instructions to find out if you must file Form 8582	23				
24 Income. Add rental and royalty income from line 22. Enter the total income here	24				7,042
25 Losses. Add royalty losses from line 22 and rental losses from line 23. Enter the total losses here	25				
26 Total rental or royalty income or (loss). Combine amounts on lines 24 and 25. Enter the result here. If Parts II, III, IV and line 38 on page 2 do not apply to you, enter the amount from line 26 on Form 1040, line 18. Otherwise, include the amount from line 26 in the total on line 40 on page 2	26				7,042

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule E (Form 1040) 1990

GEORGE H.W. & BARBARA P. BUSH

91-2973

Your social security number

Note: If you report amounts from farming or fishing on Schedule E, you must include your gross income from those activities on line 41 below.

Part II Income or Loss from Partnerships and S Corporations

If you report a loss from an at-risk activity, you MUST check either column (e) or (f) of line 27 to describe your investment in the activity. See instructions. If you check column (f), you must attach Form 6198.

27	(a) Name	(b) Enter P for partnership; S for S Corporation	(c) Check if foreign partnership	(d) Employer identification number	Investment at risk?	(e) All is at risk	(f) Some is not at risk
A							
B							
C							
D							
E							

Passive Income and Loss

Nonpassive Income and Loss

	(g) Passive loss allowed from Form 6562	(h) Passive income from Schedule K-1	(i) Nonpassive Loss from Schedule K-1	(j) Sec. 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A					
B					
C					
D					
E					
28 a Totals					
b Totals					

28 Add amounts in columns (h) and (k), line 28a. Enter total income here

28

30 Add amounts in columns (g), (i), and (j), line 28b. Enter total here

30

31 Total partnership and S corporation income or (loss). Combine amounts on lines 29 and 30. Enter the result here and include in the total on line 40 below

31

Part III Income or Loss from Estates and Trusts

32	(a) Name	(b) Employer identification number
A	PRES. & MRS. BUSH BLIND TRUST	52-6224648
B	ESTATE OF PRESCOTT S. BUSH	06-6154330
C		

Passive Income and Loss

Nonpassive Income and Loss

	(c) Passive deduction or loss allowed from Form 1362	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A		217,146		
B				605
C				
33 a Totals		217,146		605
b Totals				

34 Add amounts in columns (d) and (f), line 33a. Enter total income here

34

217,751

35 Add amounts in columns (c) and (e), line 33b. Enter total here

35

36 Total estate and trust income or (loss). Combine amounts on lines 34 and 35. Enter the result here and include in the total on line 40 below

36

217,751

Part IV Income or Loss from Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

37	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules G, line 2e (see instructions)	(d) Taxable income (net loss) from Schedules G, line 1b	(e) Income from Schedules G, line 3b

38 Combine columns (d) and (e) only. Enter the result here and include in line 40 below

38

Part V Summary

39 Net farm rental income or (loss) from Form 4835. (Also complete line 41 below.)	39	
40 TOTAL income or loss. Combine amounts on lines 28, 31, 36, 38, and 39. Enter the result here and on Form 1040, line 18	40	224,793
41 Reconciliation of Farming and Fishing Income: Enter your gross farming and fishing income reported in Parts II and III, and on line 39 (see instructions)	41	

SCHEDULE SE
(Form 1040)

Social Security Self-Employment Tax

OMB No. 1545-0074

1990

Department of the Treasury
Internal Revenue Service

▶ See instructions for Schedule SE (Form 1040).

▶ Attach to Form 1040.

Attachment
Sequence No. **17**

Name of person with self-employment income (as shown on social security card)

BARBARA P. BUSH

Social security number of person
with self-employment income ▶

Who Must File Schedule SE

You must file Schedule SE if:

- Your net earnings from self-employment were \$400 or more (or you had wages of \$100 or more if an employee of an electing church or church-controlled organization); AND
- Your wages (subject to social security or railroad retirement tax) were less than \$51,300.

Exception: If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner, AND you filed Form 4381 and received IRS approval not to be taxed on those earnings, DO NOT file Schedule SE. Instead, write "Exempt-Form 4381" on Form 1040, line 48.

For more information about Schedule SE, see the instructions.

Note: Most taxpayers can now use the new short Schedule SE on this page. But, you may have to use the longer Schedule SE on the back.

Who MUST Use the Long Schedule SE (Section B)

You must use Section B if ANY of the following applies:

- You elect the "optional method" to figure your self-employment tax (See Section B, Part II, and the instructions);
- You are minister, member of a religious order, or Christian Science practitioner and you received IRS approval (from Form 4381) not to be taxed on your earnings from these sources, but you owe self-employment tax on other earnings;
- You had church employee income of \$100 or more that was reported to you on Form W-2;
- You had tip income that is subject to social security tax, but you did not report those tips to your employer; OR
- You are a government employee with wages subject ONLY to the 1.45% Medicare part of the social security tax (Medicare qualified government wages) AND the total of all your wages (subject to social security, railroad retirement, or the 1.45% Medicare tax) plus all your earnings subject to self-employment tax is more than \$51,300.

Section A - Short Schedule SE (Read above to see if you must use the long Schedule SE on the back (Section B).)

1 Net farm profit or (loss) from Schedule F (Form 1040), line 38, and farm partnerships, Schedule K-1 (Form 1065), line 15a	1	
2 Net profit or (loss) from Schedule C (Form 1040), line 29, and Schedule K-1 (Form 1065), line 15a (other than farming). See the instructions for other income to report	2	1,000
3 Combine lines 1 and 2. Enter the result	3	1,000
4 Multiply line 3 by .9235. Enter the result. If the result is less than \$400, do not file this schedule; you do not owe self-employment tax. ▶	4	924
5 Maximum amount of combined wages and self-employment earnings subject to social security or railroad retirement tax (tier 1) for 1990.	5	51,300
6 Total social security wages and tips (from Form(s) W-2) and railroad retirement compensation (tier 1). Do not include Medicare qualified government wages on this line	6	
7 Subtract line 6 from line 5. Enter the result. If the result is zero or less, do not file this schedule; you do not owe self-employment tax. ▶	7	51,300
8 Enter the smaller of line 4 or line 7.	8	924
9 Rate of tax.	9	1.153
10 Self-employment tax. If line 8 is \$51,300, enter \$7,848.90. Otherwise, multiply the amount on line 8 by the decimal amount on line 9 and enter the result. Also enter this amount on Form 1040, line 48.	10	141

Note: Also enter one-half of this amount on Form 1040, line 25.

For Paperwork Reduction Act Notice, see Form 1040 instructions

Schedule SE (Form 1040) 1990

Computation of Foreign Tax Credit

OMB No. 1545-0047

Form 1116

Individual, Fiduciary, or Nonresident Alien Individual
 Attach to Form 1040, 1040NR, 1041 or 990-T.
 See separate instructions

91-2973 1990

Attachment
 Sequence No. 19

Department of the Treasury
 Internal Revenue Service

Name

GEORGE H.W. & BARBARA P. BUSH

Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. Check only one box. Before you check a box, read Categories of Income on page 2 of the instructions. This form is being completed for credit for taxes on:

- ☐ Passive income
☐ High withholding tax interest
☐ Financial services income
☐ Shipping income
☐ Dividends from a DISC or former DISC
☐ Distributions from a foreign sales corporation (FSC) or former FSC
☐ Lump-sum distributions (see instructions before completing form)
☒ General limitation income - all other income from sources outside the United States (including income from sources within U.S. possessions)

Resident of (name of country) **UNITED STATES**

Note: If you paid taxes to one foreign country, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country, use a separate column and line for each country.

Part I Taxable Income from Sources Outside the United States

Enter the Name of the Foreign Country or U.S. possession

A VARIOUS

B
C

1 Gross income from sources within country shown above and of the type checked above (see instructions):
DIVIDENDS & INTEREST

Applicable deductions and losses (See instructions):

2 Expenses directly allocable to income on line 1 (attach schedule)

3 Pro rata share of all other deductions not directly allocable:

a Certain itemized deductions or standard deduction (see instructions)

b Other deductions (attach schedule)

c Add lines 3a and 3b

d Total foreign source income (See instructions)

e Gross income from all sources (See instructions)

f Divide line 3d by line 3e

g Multiply line 3c by line 3f

4 Pro rata share of interest expense (see instructions).

a Home mortgage and personal interest (Enter the amount from line 7 of the worksheet on page 3 of the instructions.)

b Other interest

5 Losses from foreign sources

6 Add lines 2, 3g, 4a, 4b, and 5

7 Subtract line 6 from line 1. Enter the result here and on line 14

Foreign Country or U.S. Possession			Total
A	B	C	(Add Cols. A, B, and C)
2,511			1 2,511
97,118			
71			
97,189			
2,511			
452,803			
.005550			
539			
539			6 539
			7 1,972

Part II Foreign Taxes Paid or Accrued

Country	Credit is claimed for taxes you must check one: <input checked="" type="checkbox"/> Paid <input type="checkbox"/> Accrued	Foreign Taxes Paid or Accrued								
		In Foreign Currency				In U.S. Dollars				
		Taxes Withheld at Source on:			(d) Other Foreign Taxes Paid or Accrued	Taxes Withheld at Source on:			(h) Other Foreign Taxes Paid or Accrued	(i) Total Foreign Taxes Paid or Accrued (Add Cols. (e) through (h))
		(a) Dividends	(b) Rents and Royalties	(c) Interest		(e) Dividends	(f) Rents and Royalties	(g) Interest		
A	12/31/90					472				472
B										
C										

8 Add lines A through C, column (i). Enter total here and on line 9

For Paperwork Reduction Act Notice, see page 1 of separate instructions.

07E070

Form 1116 (1990)

Part III Figuring the Credit

9	Enter amount from line 8. This is the total foreign taxes paid or accrued for the category of income checked above in Part I.	9	472.
10	Carryback or carryover (attach detailed computation)	10	
11	Add lines 9 and 10.	11	472.
12	Reduction in foreign taxes (see instructions)	12	
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit.	13	472.
14	Enter amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. (See instructions)	14	1,972.
15	Adjustments to line 14 (See instructions)	15	
16	Combine the amounts on line 14 and line 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the type of income you checked on page 1. Skip lines 17 through 21.)	16	1,972.
17	Individuals: Enter amount from Form 1040, line 35. If you are a nonresident alien, enter amount from Form 1040NR, line 33. Estates and trusts: Enter your taxable income without the deduction for your exemption.	17	355,614.
18	Divide line 16 by line 17. (If line 16 is more than line 17, enter the figure "1.")	18	.005550
19	Individuals: Enter amount from Form 1040, line 40, less any amounts on Form 1040, lines 41 and 42. Enter amount from Form 1040NR, line 38 less any amount on Form 1040NR, line 39. Estates and trusts: Enter amount from Form 1041, Schedule G, line 1c, or Form 990-T, line 8.	19	99,572.
20	Multiply line 18 by line 19. (Maximum amount of credit.)	20	553.
21	Enter the amount from line 13 or line 20, whichever is smaller. (If this is the only Form 1118 you are completing, skip lines 22 through 29 and enter this amount on line 30. Otherwise, complete the appropriate lines in Part IV.)	21	472.

Part IV Summary of Credits from Separate Parts III (See instructions.)

22	Credit for taxes on passive income	22	
23	Credit for taxes on high withholding tax interest	23	
24	Credit for taxes on financial services income	24	
25	Credit for taxes on shipping income	25	
26	Credit for taxes on dividends from a DISC or former DISC	26	
27	Credit for taxes on distributions from a FSC or former FSC	27	
28	Credit for taxes on lump-sum distributions	28	
29	Credit for taxes on general limitation income (all other income from sources outside the U.S.)	29	472.
30	Add lines 22 through 29	30	472.
31	Reduction of credit for international boycott operations (see "Reduction of Credit for International Boycott Operations" in instructions for line 12).	31	
32	Subtract line 31 from line 30. This is your foreign tax credit. Enter here and on Form 1040, line 43; Form 1040NR, line 40; Form 1041, Schedule G, line 2a; or Form 990-T, line 9a.	32	472.

Computation of Foreign Tax Credit

Individual, Fiduciary, or Nonresident Alien Individual
▶ Attach to Form 1040, 1040NR, 1041 or 990-T.
▶ See separate instructions

91-201-1990

Attachment
Sequence No. 10

Identifying number as shown on page 1 of your tax return

GEORGE H.W. & BARBARA P. BUSH

Use a separate Form 1116 for each category of income listed below. Check only one box. Before you check a box, read Categories of

Income on page 2 of the instructions. This form is being completed for credit for taxes on:

- ☐ Passive income
☐ High withholding tax interest
☐ Financial services income

- ☐ Shipping income
☐ Dividends from a DISC or former DISC
☐ Distributions from a foreign sales corporation (FSC) or former FSC

- ☐ Lump-sum distributions (see instructions before completing form)
☒ General limitation income - all other income from sources outside the United States (including income from sources within U.S. possessions)

Resident of (name of country) **UNITED STATES**

Note: If you paid taxes to one foreign country, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country, use a separate column and line for each country.

Part I Taxable Income from Sources Outside the United States

Enter the Name of the Foreign Country or U.S. possession

A VARIOUS

B

C

1 Gross income from sources within country shown above and of the type checked above (see instructions):
DIVIDENDS & INTEREST

Foreign Country or U.S. Possession

A

B

C

Total

(Add Cols. A, B, and C)

2,511

1

2,511

Applicable deductions and losses (See instructions):

2 Expenses directly allocable to income on line 1 (attach schedule)

3 Pro rata share of all other deductions not directly allocable:

a Certain itemized deductions or standard deduction (see instructions)

b Other deductions (attach schedule)

c Add lines 3a and 3b

d Total foreign source income (See instructions)

e Gross income from all sources (See instructions)

f Divide line 3d by line 3e

g Multiply line 3c by line 3f

4 Pro rata share of interest expenses (see instructions):

a Home mortgage and personal interest (Enter the amount from line 7 of the worksheet on page 3 of the instructions.)

b Other interest

5 Losses from foreign sources

6 Add lines 2, 3g, 4a, 4b, and 5

217

6

217

7 Subtract line 6 from line 1. Enter the result here and on line 14

7

2,294

Part II Foreign Taxes Paid or Accrued

C o u n t r y	Credit claimed for taxes you must check one: <input checked="" type="checkbox"/> Paid <input type="checkbox"/> Accrued	Foreign Taxes Paid or Accrued								
		In Foreign Currency				In U.S. Dollars				
		Taxes Withheld at Source on:			(d) Other Foreign Taxes Paid or Accrued	Taxes Withheld at Source on:			(h) Other Foreign Taxes Paid or Accrued	(i) Total Foreign Taxes Paid or Accrued (Add Col. (e) through (h))
		(a) Dividends	(b) Rents and Royalties	(c) Interest		(e) Dividends	(f) Rents and Royalties	(g) Interest		
A	12/31/90					472				472
B										
C										

8 Add lines A through C, column (i). Enter total here and on line 9

472

For Paperwork Reduction Act Notice, see page 1 of separate instructions.

Form 1118 (1990)

Part III Figuring the Credit

9	Enter amount from line 8. This is the total foreign taxes paid or accrued for the category of income checked above in Part I.	9	472.
10	Carryback or carryover (attach detailed computation)	10	
11	Add lines 9 and 10.	11	472.
12	Reduction in foreign taxes (see instructions)	12	
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit	13	472.
14	Enter amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. (See instructions)	14	2,294.
15	Adjustments to line 14 (See instructions)	15	
16	Combine the amounts on line 14 and line 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the type of income you checked on page 1. Skip lines 17 through 21.)	16	2,294.
17	Individuals: Enter amount from Form 1040, line 35. If you are a nonresident alien, enter amount from Form 1040NR, line 33. Estates and trusts: Enter your taxable income without the deduction for your exemption.	17	422,503.
18	Divide line 16 by line 17. (If line 16 is more than line 17, enter the figure "1.")	18	.005430
19	Individuals: Enter amount from Form 1040, line 40, less any amounts on Form 1040, lines 41 and 42. Enter amount from Form 1040NR, line 38 less any amount on Form 1040NR, line 39. Estates and trusts: Enter amount from Form 1041, Schedule G, line 1c, or Form 990-T, line 8.	19	88,726.
20	Multiply line 19 by line 18. (Maximum amount of credit).	20	482.
21	Enter the amount from line 13 or line 20, whichever is smaller. (If this is the only Form 1118 you are completing, skip lines 22 through 29 and enter this amount on line 30. Otherwise, complete the appropriate lines in Part IV.)	21	472.

Part IV Summary of Credits from Separate Parts III (See instructions.)

22	Credit for taxes on passive income	22	
23	Credit for taxes on high withholding tax interest	23	
24	Credit for taxes on financial services income	24	
25	Credit for taxes on shipping income	25	
26	Credit for taxes on dividends from a DISC or former DISC	26	
27	Credit for taxes on distributions from a FSC or former FSC	27	
28	Credit for taxes on lump-sum distributions	28	
29	Credit for taxes on general limitation income (all other income from sources outside the U.S.)	29	472.
30	Add lines 22 through 29	30	472.
31	Reduction of credit for international boycott operations (see "Reduction of Credit for International Boycott Operations" in instructions for line 12).	31	
32	Subtract line 31 from line 30. This is your foreign tax credit. Enter here and on Form 1040, line 43; Form 1040NR, line 40; Form 1041, Schedule G, line 2a; or Form 990-T, line 9a.	32	472.

Form 6251

Alternative Minimum Tax - Individuals

See separate instructions.

Attach to Form 1040 or 1040NR. Estates and trusts, use Form 6656.

1990

Attachment
Sequence No. 32Department of the Treasury
Internal Revenue Service

Name(s) as shown on Form 1040

Your social security number

GEORGE H.W. & BARBARA P. BUSH

1	Taxable income from Form 1040, line 37. (If Form 1040, line 37 is zero, see instructions.)	1	351,514
2	Net operating loss deduction, if any, from Form 1040, line 22. (Enter as a positive amount).	2	
3	Combine lines 1 and 2	3	351,514
4	Adjustments: (See instructions before completing.)		
a	Standard deduction, if any, from Form 1040, line 34	4a	
b	Personal exemption amount from Form 1040, line 36	4b	4,100
c	Medical and dental expenses	4c	
d	Miscellaneous itemized deductions from Schedule A, (Form 1040), line 25	4d	27,897
e	Taxes from Schedule A, (Form 1040), line 8	4e	30,220
f	Refund of taxes	4f	
g	Personal interest from Schedule A, (Form 1040), line 12b	4g	4
h	Other interest adjustments	4h	
i	Reserved	4i	
j	Depreciation of tangible property placed in service after 1986	4j	8,768
k	Circulation and research and experimental expenditures paid or incurred after 1986	4k	
l	Mining exploration and development costs paid or incurred after 1986	4l	
m	Long-term contracts entered into after 2/28/86	4m	
n	Pollution control facilities placed in service after 1986	4n	
o	Installment sales of certain property	4o	
p	Adjusted gain or loss	4p	
q	Certain loss limitations	4q	
r	Tax shelter farm loss	4r	
s	Passive activity loss	4s	
t	Beneficiaries of estates and trusts	4t	
u	Combine lines 4a through 4t	4u	70,989
5	Tax preference items: (See instructions before completing.)		
a	Appreciated property charitable deduction	5a	
b	Tax-exempt interest from private activity bonds issued after 8/7/86	5b	
c	Depletion	5c	
d	Accelerated depreciation of real property placed in service before 1987	5d	
e	Accelerated depreciation of leased personal property placed in service before 1987	5e	
f	Amortization of certified pollution control facilities placed in service before 1987	5f	
g	Intangible drilling costs	5g	
h	Add lines 5a through 5g	5h	
6	Combine lines 3, 4u, and 5h	6	422,503
7	Alternative tax net operating loss deduction (Do not enter more than 90% of line 6). See instructions.	7	
8	Alternative minimum taxable income. Subtract line 7 from line 6. If married filing a separate return, see instructions.	8	422,503
9	Enter: \$40,000 (\$20,000 if married filing separately; \$30,000 if single or head of household)	9	40,000
10	Enter: \$150,000 (\$75,000 if married filing separately; \$112,500 if single or head of household)	10	150,000
11	Subtract line 10 from line 8. If zero or less, enter -0- here and on line 12 and go to line 13	11	272,503
12	Multiply line 11 by 25% (.25)	12	68,126
13	Subtract line 12 from line 8. If zero or less, enter -0-. If completing this form for a child under age 14, see instructions for amount to enter	13	
14	Subtract line 13 from line 8. If zero or less, enter -0- here and on line 16 and skip lines 15 through 18	14	422,503
15	Multiply line 14 by 21% (.21)	15	88,726
16	Alternative minimum tax foreign tax credit. See instructions	16	472
17	Alternative minimum tax. Subtract line 16 from line 15	17	88,254
18	Enter your tax from Form 1040, line 38, minus foreign tax credit on Form 1040, line 43. If an amount is entered on line 39 of Form 1040, see instructions	18	99,100
19	Alternative minimum tax. Subtract line 18 from line 17. If zero or less, enter -0-. Enter this amount on Form 1040, line 49. If completing this form for a child under age 14, see instructions for amount to enter	19	0

For Paperwork Reduction Act Notice, see separate instructions.

Form 6251 (1990)

Underpayment of Estimated Tax by Individuals and Fiduciaries

► See separate instructions

► Attach to Form 1040, Form 1040A, or Form 1041

1990

Attachment
Sequence No. 44Department of the Treasury
Internal Revenue Service

Name(s) as shown on tax return

Identifying number

GEORGE H.W. & BARBARA P. BUSH

A Change To Note

In response to many requests to simplify Form 2210, IRS has developed a new Short Method to figure the penalty. To see if you can use the short method, read the instructions on this page. Then, if you can use it, complete only Parts I and II below.

Purpose of Form

Use Form 2210 to see if you owe a penalty for underpaying your estimated tax and, if you do, to figure the amount of the penalty.

If you prefer, IRS will figure the penalty for you and send you a bill. But see Lowering Your Penalty below. If you want IRS to figure the penalty for you, leave the penalty line on your return blank; do not file Form 2210.

Lowering Your Penalty

If any of the conditions below apply to you, you may be able to lower the amount of your penalty. But you must complete and attach Form 2210 to your tax return to do so. In the space next to the penalty amount on your tax return, you must write the letter (A, B or C) that corresponds to any of the following conditions that apply to you.

- You claim a waiver. See page 1 of the separate instructions.
- Your income varied during the year and you use the annualized income installment method to figure your required installment payments. See the instructions for line 20.
- You had Federal income tax withheld from your wages and you treat it as being paid when it was actually withheld (instead of in four equal amounts). See the instructions for line 21.

Short Method

If you made estimated tax payments, you may use the short method only if:

- You paid your estimated tax in four equal amounts, and
- You paid your estimated tax on the due dates.

You may also use the short method if you made no payments at all, or your only credit for payment was due to Federal income tax withholding.

Note: If you made estimated tax payments, the short method will give the precise penalty amount only if your payments were made exactly on the due dates. If any payment was made early, using the short method may cause you to pay a larger penalty than the regular method. If the payment is only a few days early, the difference generally will be small.

Although line 17 of the short method requires a five-place decimal computation, it will relieve you of making the more complicated computations under the regular method.

Do not use the short method if you made any of your estimated tax payments late.

You must use the regular method if B or C under Lowering Your Penalty applies. But if A applies, and you meet the conditions above, you may use the short method.

Regular Method

Use the regular method to figure the penalty if you did not pay your estimated tax payments on the due dates or in four equal amounts. To use the regular method, complete Part I below and Part III on the back.

Part I Required Annual Payment - All filers must complete this part.

1	Enter your 1990 tax after credits (from Form 1040, line 47; Form 1040A, line 25, or Form 1041, Schedule G, line 4).	1	99,100
2	Other taxes (see instructions)	2	141
3	Add lines 1 and 2	3	99,241
4	Earned income credit	4	
5	Credit for Federal tax on fuels	5	
6	Add lines 4 and 5	6	
7	Current year tax. Subtract line 6 from line 3	7	99,241
8	Multiply line 7 by 90% (.90) and enter the result	8	89,317
9	Withholding taxes from 1990 Form 1040, lines 56 and 58; Form 1040A, line 28a; or Form 1041, line 24e. Include any credit from Form 4469. (Do not include any estimated tax payments on this line)	9	61,370
10	Subtract line 9 from line 7. If the result is less than \$500, stop here; do not complete or file this form. You do not owe the penalty.	10	37,871
11	Enter your prior year (1989) tax. (Caution: See instructions.)	11	101,382
12	Required annual payment. Enter the smaller of line 8 or line 11 (see instructions)	12	89,317

Note: If line 8 is equal to or more than line 12, stop here. You do not owe the penalty.

Part II Short Method - If you made estimated tax payments, use this method only if they were paid on the due dates and in four equal amounts. Otherwise, use the regular method (Part III) on the back.

13	Enter the amount, if any, from line 8 above.	13	
14	Enter the total amount, if any, of estimated tax payments you made.	14	
15	Add lines 13 and 14	15	
16	Total underpayment for year. Subtract line 15 from line 12. (If the result is zero or less, stop here; you do not owe the penalty.)	16	
17	Multiply line 16 by .07315 and enter the result	17	
18	• If the amount on line 16 was paid on or after 4/15/91, enter -0-.		
	• If the amount on line 16 was paid before 4/15/91, make the following computation to find the amount to enter on line 18.		
	Amount on line 16 X Number of days paid before 4/15/91 (see instructions) X .0003	18	
19	PENALTY. Subtract line 18 from line 17. Enter the result here and on Form 1040, line 67; Form 1040A, line 33; or Form 1041, line 26.	19	

Part II Regular Method

Section A - Figure Your Underpayment		Payment Due Dates				
		(a) 4/15/90	(b) 6/15/90	(c) 9/15/90	(d) 1/15/91	
20	Required installment. Divide line 12 by 4 and enter the result in each column. Exception: If you use the annualized income installment method, see the instructions and check this box <input type="checkbox"/> Complete lines 21 through 28 of one column before going to the next column.	20	22,329	22,329	22,329	22,330
21	Estimated tax paid and tax withheld. (See instructions.) For column (a) only, also enter the amount from line 21 on line 25. If line 21 is equal to or more than line 20 for all payment periods, stop here; you do not owe the penalty. But see "Lowering Your Penalty" on page 1.	21	27,343	29,343	31,343	25,341
22	Enter amount, if any, from line 26 of previous column	22				
23	Add lines 21 and 22	23				
24	Add amounts on lines 26 and 27 of the previous column. Enter the total here	24				
25	Subtract line 24 from line 23. If zero or less, enter -0-. For column (a) only, enter the amount from line 21	25				
26	Remaining underpayment from previous period. If the amount on line 25 is -0-, subtract line 23 from line 24 and enter the result. Otherwise, enter -0-	26				
27	Underpayment. If line 20 is equal to or more than line 25, subtract line 25 from line 20. Then go to line 21 of next column. Otherwise go to line 28	27				
28	Overpayment. If line 25 is more than line 20, subtract line 20 from line 25. Then go to line 21 of next column	28				

Section B - Figure the Penalty (Complete lines 29 and 30 of one column before going to the next column.)

		4/15/90	6/15/90	9/15/90	1/15/91
29	Number of days FROM the date shown above line 29 TO the date the amount on line 27 was paid or 4/15/91, whichever is earlier.	Days:	Days:	Days:	Days:
30	Number of days on line 29 x .11 x underpayment on line 27 (see instructions)	\$	\$	\$	\$
31	PENALTY. Add the amounts in each column of line 30. Enter the total here and on Form 1040, line 67; Form 1040A, line 33; or Form 1041, line 28.	31 \$ NONE			

===== STATE AND LOCAL TAXES PAID =====

STATE AND LOCAL INCOME TAXES	3,596
TOTAL STATE & LOCAL TAXES PAID	3,596 **
CARRIED TO SCHEDULE A, LINE 5	

===== OTHER TAXES EXPENSE =====

PERSONAL PROPERTY TAXES	156
TOTAL OTHER TAXES EXPENSE	156 **
CARRIED TO SCHEDULE A, LINE 7	

===== PERSONAL INTEREST EXPENSE =====

PERSONAL INTEREST	41
TOTAL PERSONAL INTEREST EXPENSE	41 **
CARRIED TO SCHEDULE A, LINE 12A	

===== CASH CONTRIBUTIONS - 50 PCT. LIMIT =====

VARIOUS ORGANIZED CHARITIES	38,567
FROM ESTATE/TRUST 52-6224648	330
TOTAL	38,997 **
INCLUDED IN SCH. A, LINE 14	

===== MISCELLANEOUS DEDUCTIONS SUBJECT TO 2% FLOOR =====

EXPRESS CHGS RE TAX INFORMATION	33
LEGAL FEES-TAX ADVICE/OTHER MATTERS	20,500
FEES & SEC. 212 EXP THROUGH PRESIDENT	15,753
AND MRS. GEORGE BUSH QUALIFIED BLIND	
TRUST	
ENTERTAINMENT	833
LESS 20% ADJ (167)	666
TOTAL MISC. DEDNS. SUBJECT TO LIMIT	36,952 **
CARRIED TO SCHEDULE A, LINE 21	

===== SUMMARY OF RENTS AND ROYALTIES =====

PROPERTY NO.	GROSS INCOME	DEPLETION, DEPRECIATION	OTHER EXPENSE	NET LOSS	NET PROFIT
NO. 1 T (royalty)	14,084		7,042		7,042
TOTALS:	14,084		7,042		
SCH. E, LINE 25: TOTAL FROM PROPERTIES WITH PROFITS					7,042
SCH. E, LINE 26: TOTAL FROM PROPERTIES WITH LOSSES				0	

GEORGE H.W. & BARBARA P. BUSH

91-2973

----- STATEMENT OF WAGES AND SALARY INCOME -----

T/S	NAME OF EMPLOYER	GROSS WAGES	FICA TAX WITHHELD	FED. TAX WITHHELD
T	THE WHITE HOUSE	200,000	3,924	61,370
	TOTALS	200,000	3,924	61,370

1 Control number		OMB NO 1545-0008		Bur.	Reg.	DR.	F.D.C.	4 Pension Plan 5 Deferred Compensation 6 Re-issue	
2 Employer's name, address, and ZIP code				7 Allocated tips		8 Advance EIC payment			
The White House Office of Administration Personnel Management Division Room 4013, NEOB, 725 17th Street NW Washington, D. C. 20503				9 Federal income tax withheld		10 Wages, tips, other compensation			
				\$61,369.56		\$200,000.00			
3 Employer's identification number	4 Employer's state I.D. number			11 Social security tax withheld		12 Social security wages			
				\$3,924.45		\$51,300.00			
5 Employee's social security number				13 Social security tips		14 Nonqualified plans			
19 Employee's name, address and ZIP code				15 Dependent care benefits		16 Fringe benefits incl. in Box 10			
George H. W. Bush									
The White House				17		18 Other			
Washington, D. C. 20500									
20	21	22	23	The social security rate of _____ includes _____ for recipient for hospital insurance benefits and survivors and disability insurance					
24 State income tax	25 State wages, tips, etc.	26 Name of state	27 Local income tax	28 Local wages, tips, etc.	29 Name of locality				
30 401(k) Federal Amt.	31 401(k) State Amt.	32 401(k) Local Amt.	33 Medicare tax withheld	34 Medicare Wages					

Form W-2 Wage and Tax Statement 1990

Dept. of the Treasury - Internal Revenue Service
 This information is being furnished to the Internal Revenue Service.

GEORGE H.W. & BARBARA P. BUSH

----- STATEMENT OF MISCELLANEOUS INCOME -----

T/S	DESCRIPTION	AMOUNT	FED. TAX WITHHELD
8	SIGNER'S FEE--READER'S DIGEST (BARBARA P. BUSH)	1,000	

TOTALS

1,000 **
CARRIED TO FORM 1040, LINE 22 **

GEORGE H. W. AND BARBARA P. BUSH
1990 CHARITABLE CONTRIBUTIONS

Ducks Unlimited Foundation Long Grove, IL	\$ 200
The Nature Conservancy Arlington, VA	35
1st Congregational Church Kennebunkport, ME	4,500
St. Ann's Episcopal Church Kennebunkport, ME	250
St. Martin's Episcopal Church Houston, TX	1,300
Episcopal Church Foundation New York, NY	250
St. John's Church Washington, DC	650
River Tree Arts Kennebunkport, ME	50
American Red Cross Washington, DC	1,000
Black Student Fund Washington, DC	500
The Living Bank Houston, TX	100
The DeBakey Medical Foundation Houston, TX	500
Sloan-Kettering Institute for Cancer Research New York, NY	800
Leukemia Society Houston, TX	200

GEORGE H. W. AND BARBARA P. BUSH
1990 CHARITABLE CONTRIBUTIONS
(Continued)

91-2973

United Way Biddeford, ME	\$ 300
Trustees of Phillips Academy Andover, MA	1,000
United Negro College Fund New York, NY	5,521
M. D. Anderson Cancer Center Houston, TX	4,521
Yale University New Haven, CT Alumni Class of 1948	500 40
Camp David Chapel Fund Chambersburg, PA	2,000
Maine Medical Center Portland, ME	500
Morehouse School of Medicine Atlanta, GA	1,000
Philosophical Society of Texas Austin, TX	50
United Way Houston, TX	1,000
Combined Federal Campaign Washington, DC	2,000
Star of Hope Mission Houston, TX	300
Salvation Army Houston, TX	1,000

GEORGE H. W. AND BARBARA P. BUSH
1990 CHARITABLE CONTRIBUTIONS
(Continued)

Ashley Hall Foundation Charleston, SC	\$ 100
Kennebunkport Fire Company Kennebunkport, ME	250
Sweetser Childrens Home Saco, ME	100
The Barbara Bush Foundation for Family Literacy Washington, DC	1,000
Nina Hyde Breast Cancer Center (Georgetown University) Washington, DC	100
AME Zion Church Washington, DC	250
Ted Wolf Trust Fund (Maryland State Trooper Lodge) Laurel, MD	250
Brick Store Museum Kennebunk, ME	50
National Audubon Birdathon Washington, DC	100
Uniformed Division Police Benefit Fund Washington, DC	200
Shiloh Baptist Church Washington, DC	500
Alumni of Smith College Northhampton, MA	200
Wildwood Volunteer Fire Dept. Kennebunkport, ME	100
American Lung Association New York, NY	200

GEORGE H. W. AND BARBARA P. BUSH
1990 CHARITABLE CONTRIBUTIONS
(Continued)

Thyroid Foundation Boston, MA	\$ 1,000
National Rehabilitation Hospital Washington, DC	500
United Service Organization Washington, DC	1,000
Houston School for Deaf Houston, TX	500
Louis T. Graves Memorial Library Kennebunkport, ME	100
Wiley College Marshall, TX	500
Bread for the City Washington, DC	100
Crohns & Colitis Foundation New York, NY	1,000
Reynolds G. Garza Law School Edinburgh, TX	500
	<hr/>
SUB-TOTAL	38,667
Through President and Mrs. George Bush Qualified Blind Trust	330
	<hr/>
TOTAL	<u>\$38,997</u>

1991
Tax Form 1040

Label	For the year Jan. - Dec. 31, 1991, or other tax year beginning		1991, ending	19	OMB No. 1545-0047
(See Instructions on page 11.)	Your first name and initial GEORGE H.W.		Last name BUSH	Your social security number	
Use IRS label. Otherwise please print or type	Spouse's first name and initial BARBARA P.		Last name BUSH	Spouse's social security number	
Presidential Election Campaign (See page 11)	Do you want \$1 to go to this fund? If joint return, does your spouse want \$1 to go to this fund?				No No Note: Checking "Yes" will not change your tax or reduce your refund.
	C/O BESSEMER TRUST COMPANY, N.A. 630 FIFTH AVENUE-TAX DEPT NEW YORK NY 10111				For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Filing Status	1	Single
	2	<input checked="" type="checkbox"/> Married filing joint return (even if only one had income)
	3	Married filing separate return. Enter spouse's social security no. above and full name here.
	4	Head of household (with qualifying person). (See page 12.) If the qualifying person is your child but not your dependent, enter this child's name here.
	5	Qualifying widow(er) with dependent child (year spouse died \geq 19). (See page 12.)

Exemptions (See page 12.)	6a	<input checked="" type="checkbox"/> Yourself If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 33b on page 2.	No. of boxes checked on 6a and 6b	2			
	b	<input checked="" type="checkbox"/> Spouse					
If more than 7 dependents, see page 13.	c	Dependents	(2) Check if under age 1	(3) If age 1 or older, dependent's social security number	(4) Dependent's relationship to you	(5) No. of months lived in your home in 1991	No. of your children on 6c who:
		(1) Name (first, initial, and last name)					• lived with you
							• didn't live with you due to divorce or separation (see page 14)
							No. of other dependents on 6c
	d	If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here.					Add numbers entered on lines above
	e	Total number of exemptions claimed					2

Income	7	Wages, salaries, tips, etc. (attach Form(s) W-2.)	7	200,000
	8a	Taxable interest income (also attach Schedule B if over \$400)	8a	15,269
	b	Tax-exempt interest income (see pg. 16) DON'T include on line 8a	eb	3,104
	9	Dividend income (also attach Schedule B if over \$400)	9	9,545
	10	Taxable refunds of state and local income taxes, if any, from worksheet on page 16	10	
	11	Alimony received	11	
	12	Business income or (loss) (attach Schedule C)	12	
	13	Capital gain or (loss) (attach Schedule D)	13	40,847
	14	Capital gain distributions not reported on line 13 (see page 17)	14	
	15	Other gains or (losses) (attach Form 4797)	15	
	15a	Total IRA distributions	15a	
	15b	Taxable amount (see page 17)	15b	
	17a	Total pensions and annuities	17a	
	17b	Taxable amount (see page 17)	17b	
	Adjustments to Income (See page 19.)	16	Rents, royalties, partnerships, estates, trusts, etc. (attach Schedule E)	16
19		Farm income or (loss) (attach Schedule F)	19	
20		Unemployment compensation (insurance) (see page 18)	20	
21a		Social security benefits	21a	
21b		Taxable amount (see page 18)	21b	
22		Other income (list type and amount - see page 19)	22	
23		Add the amounts shown in the far right column for lines 7 through 22. This is your total income	23	1329,580
24a		Your IRA deduction, from applicable worksheet on page 20 or 21	24a	
b		Spouse's IRA deduction, from applicable worksheet on page 20 or 21	24b	
25		One-half of self-employment tax (see page 21)	25	5,124
Adjusted Gross Income	26	Self-employed health insurance deduction, from worksheet on page 22	26	
	27	Keogh retirement plan and self-employed SEP deduction	27	
	28	Penalty on early withdrawal of savings	28	
	29	Alimony paid. Recipient's SSN	29	
	30	Add lines 24a through 29. These are your total adjustments	30	5,124
	31	Subtract line 30 from line 23. This is your adjusted gross income. If this amount is less than \$21,250 and a child lived with you, see page 45 to find out if you can claim the "Earned Income Credit" on line 56.	31	1324,456

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92-4012

2

Form **2848**
(Rev. March 1991)
Department of the Treasury
Internal Revenue Service

**Power of Attorney
and Declaration of Representative**

For Paperwork Reduction and Privacy Act Notice, see the Instructions.

OMB No. 1545-0047
Expires 5-31-93

Part I Power of Attorney

1 Taxpayer Information

Taxpayer name(s) and address (Please type or print.)
George H.W. Bush
Barbara P. Bush
The White House
Washington, D.C. 20500

Social security number(s)

Daytime telephone number
(202) 456-1414

Employer identification
number

Plan number (if applicable)

hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

2 Representative(s) (Please type or print.)

Name and address
Mr. John R. Whitmore, Bessemer Trust Company, NA
630 Fifth Avenue, New York, NY 10111

CAF No.
Telephone No. (212) 708-9111
Fax No. ()
Check if new: Address ☐ Telephone No. ☐

Name and address
Mr. G. William Clapp, Bessemer Trust Company, NA
630 Fifth Avenue, New York, NY 10111

CAF No. 6500-15349 R
Telephone No. (212) 708-9269
Fax No. ()
Check if new: Address ☐ Telephone No. ☐

Name and address

CAF No.
Telephone No. ()
Fax No. ()
Check if new: Address ☐ Telephone No. ☐

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

3 Tax Matters

Type of Tax (Income, Employment, Excise, etc.)	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s)
Individual Income Tax	1040	1991
Individual Declaration of Estimated Tax	1040-ES	1992

4 Specific Use Not Recorded on Centralized Authorization File (CAF).—If the power of attorney is for a specific use not recorded on CAF, please check this box. (See the instructions for Specific Use Not Recorded on CAF on page 4.) ☐

5 Acts Authorized.—The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax matters described in line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks or the power to sign certain returns. (See instructions.)

List any specific additions or variations to the acts otherwise authorized in this power of attorney:
and specifically to perform those acts specified on Appendix A hereto.

Note: In general, an unenrolled preparer of tax returns cannot sign any document for a taxpayer. See Revenue Procedure 81-38, printed as Pub. 470, for more information.

Note: The tax matters partner/person of a partnership or S corporation is not permitted to authorize representatives to perform certain acts. See the instructions for more information.

6 Receipt of Refund Checks.—If you want to authorize a representative named in line 2 to receive, BUT NOT TO ENDORSE OR CASH, refund checks, initial here BPB and list the name of that representative below.

Name of representative to receive refund check(s) ▶ Mr. John R. Whitmore

- 7 **Notices and Communications.**—Notices and other written communications will be sent to the first representative listed in line 2.
- a If you want the second representative listed to receive such notices and communications, check this box ☒
- b If you do not want any notices or communications sent to your representative, check this box ☐
- 8 **Retention/Revocation of Prior Power(s) of Attorney.**—The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here ☐

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

- 9 **Signature of Taxpayer(s).**—If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner/person, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.
- If this power of attorney is not signed, it will be returned.

✓ George H.W. Bush 3-24-92
Signature Date Title (if applicable)
George H.W. Bush

✓ Barbara P. Bush 3-24-92
Signature Date Title (if applicable)
Barbara P. Bush

Part II Declaration of Representative

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Treasury Department Circular No. 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
 - a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c Enrolled Agent—enrolled as an agent under the requirements of Treasury Department Circular No. 230.
 - d Officer—a bona fide officer of the taxpayer organization.
 - e Full-Time Employee—a full-time employee of the taxpayer.
 - f Family Member—a member of the taxpayer's immediate family (i.e., spouse, parent, child, brother, or sister).
 - g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Service is limited by section 10.3(d)(1) of Treasury Department Circular No. 230).
 - h Unenrolled Return Preparer—an unenrolled return preparer under section 10.7(a)(7) of Treasury Department Circular No. 230.

► If this power of attorney is not signed, it will be returned.

Designation—Insert above letter (a–h)	Jurisdiction (state) or Enrollment Card No.	Signature	Date
<u>h</u>		<u>John R. Whapmore</u>	<u>3/24/92</u>
<u>b</u>	<u>NY</u>	<u>William C. Chapman</u>	<u>3/24/92</u>



APPENDIX A

1. Prepare, sign and file return.
2. Receive, but not endorse or cash, refund checks for the above tax matters.
3. Execute waivers (including offers of waivers) of restrictions on assessment or collection of deficiencies in tax and waivers of notice of disallowance of a claim for credit or refund.
4. To execute consents extending the statutory period of assessment or collection of taxes.
5. Execute closing agreements under section 7121 of the Internal Revenue Code.

92-4012

Poor Original



GEORGE BUSH
WASHINGTON

March 15, 1992

District Director
Internal Revenue Service
3223 Briar Park
Houston, Texas 77027

Dear Sir:

On January 17, 1981, we executed a Trust Agreement with W. S. Parish & Company as Trustees. This Trust qualified as a "blind" trust that meets the requirements of Section 202(f)(4)(B) of the Ethics in Government Act of 1978. Article Sixth(B) of the Trust Agreement provides that during the trust term the Trustee shall be responsible for preparing and filing our federal and state income tax returns. W. S. Parish & Company, the Initial Trustee, has resigned, and Bessemer Trust Company is currently serving as Trustee.

Therefore, pursuant to Section 1.6012-1(a)(5) of the Income Tax Regulations and Revenue Procedure 80-59, 1980-2 C.B. 855, we hereby request your permission to have our federal income tax returns for 1991 and our Declaration of Estimated Tax for 1992 made by Bessemer Trust Company as our Trustee and agent.

Please send your approval of this request to us at the following address:

George Bush
The White House
Washington, D. C. 20500
Attention: Don Rhodes
Personal Assistant to the President

Sincerely,

George H. W. Bush

Barbara P. Bush

Tax Computation

If you want the IRS to figure your tax, see page 24.

32	Amount from line 31 (adjusted gross income)	32	1324,456
33a	Check if: <input checked="" type="checkbox"/> You were 65 or older <input type="checkbox"/> Blind; <input checked="" type="checkbox"/> Spouse was 65 or older <input type="checkbox"/> Blind. Add the number of boxes checked above and enter the total here	33a	2
b	If your parent (or someone else) can claim you as a dependent, check here	33b	
c	If you are married filing a separate return and your spouse itemizes deductions, or you are a dual-status alien, see page 23 and check here	33c	
34	Enter the larger of your: <ul style="list-style-type: none"> Itemized deductions (from Schedule A, line 26), OR Standard deduction (shown below for your filing status) Caution: If you checked any box on line 33a or b, go to page 23 to find your standard deduction. If you checked box 33c, your standard deduction is zero. <ul style="list-style-type: none"> Single - \$3,400 Head of household - \$5,000 Married filing jointly or Qualifying widow(er) - \$5,700 Married filing separately - \$2,850 	34	669,484
35	Subtract line 34 from line 32.	35	654,972
36	If line 32 is \$75,000 or less, multiply \$2,150 by the total number of exemptions claimed on line 6a. If line 32 is over \$75,000, see page 24 for the amount to enter.	36	0
37	Taxable income. Subtract line 36 from line 35. (If line 36 is more than line 35, enter -0-.)	37	654,972
38	Enter tax. Check if from: a <input type="checkbox"/> Tax Table, b <input type="checkbox"/> Tax Rate Schedules, or c <input checked="" type="checkbox"/> Schedule D, or d <input type="checkbox"/> Form 8815 (see page 24). (Amount, if any, from Form(s) 8814 ▶ a)	38	194,931
39	Additional taxes (see page 24). Check if from: a <input type="checkbox"/> Form 4970, b <input type="checkbox"/> Form 4972	39	
40	Add lines 38 and 39	40	194,931

Credits

(See page 25.)

41	Credit for child and dependent care expenses (attach Form 2441)	41	
42	Credit for the elderly or the disabled (attach Schedule R)	42	
43	Foreign tax credit (attach Form 1116)	43	337
44	Other credits (see page 25). Check if from a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8396 c <input type="checkbox"/> Form 8801 d <input type="checkbox"/> Form (specify)	44	
45	Add lines 41 through 44	45	337
46	Subtract line 45 from line 40. (If line 45 is more than line 40, enter -0-.)	46	194,594

Other Taxes

47	Self-employment tax (attach Schedule SE)	47	10,247
48	Alternative minimum tax (attach Form 6251)	48	
49	Recapture taxes (see page 26). Check if from: a <input type="checkbox"/> Form 4255 b <input type="checkbox"/> Form 8611 c <input type="checkbox"/> Form 8826	49	
50	Social security and Medicare tax on tip income not reported to employer (attach Form 4137)	50	
51	Tax on an IRA or a qualified retirement plan (attach Form 5329)	51	
52	Advance earned income credit payments from Form W-2	52	
53	Add lines 46 through 52. This is your total tax	53	204,841

Payments

Attach Forms W-2, W-2G, and 1099-R to front

54	Federal income tax withheld (if any is from Form(s) 1099, check <input checked="" type="checkbox"/>)	54	66,034
55	1991 estimated tax payments & amount applied from 1990 return	55	145,000
56	Earned income credit (attach Schedule EIC)	56	
57	Amount paid with Form 4868 (extension request)	57	
58	Excess social security, Medicare, and RRTA tax withheld (see p. 27)	58	
59	Other payments (see page 27). Check if from a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4138	59	
60	Add lines 54 through 59. These are your total payments	60	211,034

Refund or Amount You Owe

61	If line 60 is more than line 53, subtract line 53 from line 60. This is the amount you OVERPAID	61	6,193
62	Amount of line 61 to be REFUNDED TO YOU	62	
63	Amount of line 61 to be APPLIED TO YOUR 1992 ESTIMATED TAX ▶	63	6,193
64	If line 53 is more than line 60, subtract line 60 from line 53. This is the AMOUNT YOU OWE. Attach check or money order for full amount payable to "Internal Revenue Service." Write your name, address, social security number, daytime phone number, and "1991 Form 1040" on it	64	
65	Estimated tax penalty (see page 28). Also include on line 64	65	

Sign Here

Keep a copy of this return for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	
Your signature <i>George H. Bush</i>	Date 4/9/92
Spouse's signature (if filing jointly, BOTH must sign) <i>Barbara Bush</i>	Date 4/9/92
Your occupation PRESIDENT	Spouse's occupation HOUSEWIFE

Paid Preparer's Use Only

Preparer's signature <i>JW Clapp</i>	Date 4/9/92	Check if self-employed <input type="checkbox"/>	Preparer's social security no.
Firm's name (or yours, if self-employed) and address BESSEMER TRUST CO., N.A. 630 FIFTH AVENUE NEW YORK NY			E.I. No. 13-2792165 ZIP code 10111

Form 2210

Department of the Treasury
Internal Revenue Service

Underpayment of Estimated Tax by Individuals and Fiduciaries

▶ See separate instructions

▶ Attach to Form 1040, Form 1040A, Form 1040NR, or Form 1041

OMB No. 1545-0040

1991

Attachment
Sequence No. 06

Name(s) as shown on tax return

Identifying number

GEORGE H.W. & BARBARA P. BUSH

Note: In most cases, you do not need to file Form 2210. The IRS will figure any penalty you owe and send you a bill. See Part I to find out if you should file Form 2210. If you do not need to file Form 2210, you still may use it to figure your penalty. Enter the amount from line 20 or line 34 on the penalty line of your return, but do not attach Form 2210.

Part I Reasons For Filing - If 1a, b, or c below applies to you, you may be able to lower or eliminate your penalty. But you **MUST** check the boxes that apply and file Form 2210 with your tax return. If 1d below applies to you, check that box and file Form 2210 with your tax return.

1 Check whichever boxes apply (if none of the boxes apply, do not file Form 2210):

- a ☐ You request a waiver. (In certain circumstances, the IRS will waive all or part of the penalty. See the instructions for Waiver of Penalty.)
- b ☐ You use the annualized income installment method. (If your income varied during the year, this method may reduce the amount of one or more required installments. See Instructions for Annualized Income Installment Worksheet.)
- c ☐ You had Federal income tax withheld from wages and you treat it as paid for estimated tax purposes when it was actually withheld instead of evenly on the payment due dates. (See the instructions for line 22.)
- d ☐ Your required annual payment (line 13 below) is based on your 1990 tax and you filed or are filing a joint return for either 1990 or 1991 but not for both years.

Part II Required Annual Payment - All filers must complete this part.

2	Enter your 1991 tax after credits (see instructions)	2	194,594
3	Other taxes (see instructions)	3	10,247
4	Add lines 2 and 3	4	204,841
5	Earned income credit	5	
6	Credit for Federal tax on fuels	6	
7	Add lines 5 and 6	7	
8	Current year tax. Subtract line 7 from line 4	8	204,841
9	Multiply line 8 by 90% (.90)	9	184,357
10	Withholding taxes. Do not include any estimated tax payments on this line (see instructions)	10	66,034
11	Subtract line 10 from line 8. If less than \$500, stop here; do not complete or file this form. You do not owe the penalty	11	138,807
12	Prior year (1990) tax. (Caution: See Instructions.)	12	99,241
13	Required annual payment. Enter the smaller of line 9 or line 12 (see instructions)	13	99,241

Note: If line 10 is equal to or more than line 13, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked box 1d above.

Part III Short Method (Caution: Read the instructions to see if you can use the short method. If you checked box 1b or c in Part I, skip this part and go to Part IV.)

14	Enter the amount, if any, from line 10 above	14	
15	Enter the total amount, if any, of estimated tax payments you made	15	
16	Add lines 14 and 15	16	
17	Total underpayment for year. Subtract line 16 from line 13. (If the result is zero or less, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked box 1d above.)	17	
18	Multiply line 17 by .06381	18	
19	<p>• If the amount on line 17 was paid on or after 4/15/92, enter -0-</p> <p>• If the amount on line 17 was paid before 4/15/92, make the following computation to find the amount to enter on line 19.</p> <p>Amount on line 17 X Number of days paid before 4/15/92 X .00025</p>	19	
20	PENALTY. Subtract line 19 from line 18. Enter the result here and on Form 1040, line 65; Form 1040A, line 33; Form 1040NR, line 65; or Form 1041, line 26	20	

For Paperwork Reduction Act Notice, see page 1 of separate instructions.

Form 2210 (1991)

Part IV Regular Method (See the instructions if you are filing Form 1040NR.)

Section A - Figure Your Underpayment		Payment Due Dates				
		(a) 4/15/91	(b) 6/15/91	(c) 9/15/91	(d) 1/15/92	
21	Required installment. Divide line 13 by 4 and enter the result in each column. Exception: If you use the Annualized Income Installment Worksheet, see the instructions on page 4. Be sure you checked the box on line 1b in Part I.	21	24,810	24,810	24,810	24,811
22	Estimated tax paid and tax withheld. (See instructions.) For column (a) only, also enter the amount from line 22 on line 26. (If line 22 is equal to or more than line 21 for all payment periods, stop here; you do not owe the penalty. Do not file Form 2210 unless you checked a box in Part I.) Complete lines 23 through 29 of one column before going to the next column.	22	26,509	26,509	26,509	131,507
23	Enter amount, if any, from line 29 of previous column.	23				
24	Add lines 22 and 23.	24				
25	Add amounts on lines 27 and 28 of the previous column.	25				
26	Subtract line 25 from line 24. If zero or less, enter -0-. For column (a) only, enter the amount from line 22.	26				
27	If the amount on line 26 is zero, subtract line 24 from line 25. Otherwise, enter -0-.	27				
28	Underpayment. If line 21 is equal to or more than line 26, subtract line 26 from line 21. Then go to line 23 of next column. Otherwise go to line 29.	28				
29	Overpayment. If line 26 is more than line 21, subtract line 21 from line 26. Then go to line 23 of next column.	29				

Section B - Figure the Penalty (Complete lines 30 through 33 of one column before going to the next column.)

April 16, 1991 - December 31, 1991		4/15/91	6/15/91	9/15/91		
30	Number of days FROM the date shown above line 30 TO the date the amount on line 26 was paid or 12/31/91, whichever is earlier.	Days:	Days:	Days:		
31	Underpayment on line 28 X Number of days on line 30 X .10 (see instructions) 365	31	\$	\$	\$	
January 1, 1992 - April 15, 1992		12/31/91	12/31/91	12/31/91	1/15/92	
32	Number of days FROM the date shown above line 32 TO the date the amount on line 26 was paid or 4/15/92, whichever is earlier.	Days:	Days:	Days:	Days:	
33	Underpayment on line 28 X Number of days on line 32 X .09 (see instructions) 366	33	\$	\$	\$	
34	PENALTY. Add all amounts on lines 31 and 33 in all columns. Enter the total here and on Form 1040, line 65; Form 1040A, line 33; Form 1040NR, line 65; or Form 1041, line 26.				34	\$ NONE

92-4012

OMB No. 1545-0047

1991

Attachment
Sequence No. 07**SCHEDULE A**
(Form 1040)Department of the Treasury
Internal Revenue Service**Itemized Deductions**

▶ Attach to Form 1040

▶ See Instructions for Schedule A (Form 1040)

Name(s) as shown on Form 1040

Your social security number

GEORGE H.W. & BARBARA P. BUSH

Medical and Dental Expenses	Caution: Do not include expenses reimbursed or paid by others.		
1	Medical and dental expenses (See page 38.)	1	
2	Enter amount from Form 1040, line 32.	2	
3	Multiply line 2 above by 7.5% (.075)	3	
4	Subtract line 3 from line 1. Enter the result. If less than zero, enter -0-	4	
Taxes You Paid	5 State and local income taxes	5	4,190
(See page 38.)	6 Real estate taxes	6	24,807
	7 Other taxes (list - include personal property taxes) ▶	7	122
	SEE STATEMENT A1		
	8 Add lines 5 through 7. Enter the total.	8	29,119
Interest You Paid	9a Home mortgage interest and points reported to you on Form 1098	9a	
(See page 39.)	b Home mortgage interest not reported to you on Form 1098. (If paid to an individual, show that person's name and address.) ▶		
	10 Points not reported to you on Form 1098. (See instructions for special rules.)	10	
Note: Personal interest is no longer deductible.	11 Investment interest (attach Form 4952 if required). (See page 40.)	11	
	12 Add lines 9a through 11. Enter the total.	12	
Gifts to Charity	Caution: If you made a charitable contribution and received a benefit in return, see page 40.		
(See page 40.)	13 Contributions by cash or check.	13	818,803
	14 Other than cash or check (You MUST attach Form 8283 if over \$500).	14	
	15 Carryover from prior year	15	
	CONTRIBUTIONS IN EXCESS OF LIMITS		-156,575
	16 Add lines 13 through 15. Enter the total.	16	662,228
Casualty and Theft Losses	17 Casualty or theft loss(es) (attach Form 4684). (See page 40.)	17	
Moving Expenses	18 Moving expenses (attach Form 3903 or 3903F). (See page 41.)	18	
Job Expenses and Most Other Miscellaneous Deductions	19 Unreimbursed employee expenses - job travel, union dues, job education, etc. (You MUST attach Form 2106 if required. See instructions.) ▶	19	
(See Instructions on page 41 for expenses to deduct here.)	20 Other expenses (investment, tax preparation, safe deposit box, etc.). List type and amount ▶	20	41,360
	SEE STATEMENT A1	21	41,360
	21 Add the lines 19 and 20.	21	1324,456
	22 Enter amount from Form 1040, line 32.	22	26,489
	23 Multiply line 22 above by 2% (.02)	23	
	24 Subtract line 23 from line 21. Enter the result. If less than zero, enter -0-	24	14,871
Other Miscellaneous Deductions	25 Other (from list on page 41 of Instructions). List type and amount ▶	25	
Total Itemized Deductions	26 • If the amount on Form 1040, line 32, is \$100,000 or less (\$50,000 or less if married filing separately), add lines 4, 8, 12, 16, 17, 18, 24, and 25. Enter the total here. • If the amount on Form 1040, line 32, is more than \$100,000 (more than \$50,000 if married filing separately), see page 42 for the amount to enter. Caution: Be sure to enter on Form 1040, line 34, the LARGER of the amount on line 26 above or your standard deduction.	26	669,484

GEORGE H.W. & BARBARA P. BUSH

Schedule B - Interest and Dividend Income

Attachment
Sequence No. 08Part I
Interest
Income(See
pages 15
and 43.)

If you received more than \$400 in taxable interest income, or you are claiming the exclusion of interest from Series EE U.S. savings bonds issued after 1989 (see page 43), you must complete Part I. List ALL interest received in Part I. If you received more than \$400 in taxable interest income, you must also complete Part III. If you received, as a nominee, interest that actually belongs to another person, or you received or paid accrued interest on securities transferred between interest payment dates, see page 43.

Interest Income

- 1 Interest income. (List name of payer - if any interest income is from seller-financed mortgages, see instructions and list this interest first.)

EQUITABLE LIFE ASSURANCE SOC

OCEAN NATIONAL BANK

PRES. & MRS. BUSH BLIND TRUST 52-6224648

PRES. & MRS. BUSH BLIND TRUST 52-6224648

WHITE HOUSE FEDERAL CR. UNION

Amount

493

576

11,034

3,084

82

Note: If you received a Form 1099-INT or Form 1099-OID or substitute statement, from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

- 2 Add the amounts on line 1

15,269

- 3 Enter the excludable savings bond interest, if any, from Form 8815, line 14.

Attach Form 8815 to Form 1040

- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040, line 8a

15,269

Part II
Dividend
Income(See
pages 16
and 43.)

If you received more than \$400 in gross dividends and/or other distributions on stock, you must complete Parts II and III. If you received, as a nominee, dividends that actually belong to another person, see page 43.

Dividend Income

- 5 Dividend income (List name of payer - include on this line capital gain distributions, nontaxable distributions, etc.)

PRES. & MRS. BUSH BLIND TRUST 52-6224648

Amount

9,545

Note: If you received a Form 1099-DIV, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total dividends shown on that form.

- 6 Add the amounts on line 5

9,545

- 7 Capital gain distributions. Enter here and on Schedule D *

7

- 8 Nontaxable distributions. (See the instructions for Form 1040, line 8.)

8

- 9 Add lines 7 and 8

9

- 10 Subtract line 9 from line 6. Enter the result here and on Form 1040, line 9

9,545

*If you received capital gain distributions but do not need Schedule D to report any other gains or losses, see the instructions for Form 1040, lines 13 and 14.

Part III
Foreign
Accounts
and
Foreign
Trusts(See
page 43.)

If you received more than \$400 of interest or dividends, OR if you had a foreign account or were a grantor of, or a transferor to, a foreign trust, you must answer both questions in Part III.

Yes No

- 11a At any time during 1991, did you have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See page 43 for exceptions and filing requirements for Form TD F 90-22.1.)

X

- b If "Yes," enter the name of the foreign country

- 12 Were you the grantor of, or transferor to, a foreign trust that existed during 1991, whether or not you have any beneficial interest in it? If "Yes," you may have to file Form 3520, 3520-A, or 926

X

Names as shown on Form 1040

▶ For more space to list transactions for lines 1a and 8a, get Schedule D-1 (Form 1040).

ОМБ № 130

199

Attachment
Sequence No. 12A

YOUR SOCIAL SECURITY NUMBER

GEORGE H.W. & BARBARA P. BUSH

Caution: Add the following amounts reported to you for 1991 on Form(s) 1099-B and 1099-S (or on substitute statements): (a) proceeds from transactions involving stocks, bonds, and other securities, and (b) gross proceeds from real estate transactions not reported on another form or schedule. If this total does not equal the total of lines 1c and 8c, column (d), attach a statement explaining the difference.

(a) Description of property (Example, 100 shares 2% preferred at "Z" Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (MO., day, yr.)	(d) Sales price (see instructions)	(e) Cost or other basis (see instructions)	(f) LOSS If (e) is more than (d), subtract (d) from (e)	(g) GAIN If (d) is more than (e), subtract (e) from (d)
---	---	----------------------------------	---------------------------------------	--	---	---

1a Stocks, Bonds, Other Securities, and Real Estate, Include Form 1099-B and 1099-S Transactions. See Instructions.

[illegible]

1b Amounts from Schedule D-1, line 1b (attach Schedule D-1)

1c Total of All Sales Price Amounts

Add column (d) of lines 1a and 1b ▶ 1c

1d Other Transactions (Do NOT include real estate transactions from Forms 1099-S on this line. Report them on line 1a.)

	1	1	1			
	1	1	1			
	1	1	1			

2 Short-term gain from sale or exchange of your home from Form 2119, line 10 or 14c.

3 Short-term gain from installment sales from Form 6252, line 22 or 30

4 Net short-term gain or (loss) from partnerships, S corporations, and fiduciaries

5 Short-term capital loss carryover from 1990 Schedule D, line 29.

5 Add lines 1a, 1b, 1d, and 2 through 5, in columns (f) and (g)

7 Net short-term capital gain or (loss). Combine columns (f) and (g) of line 6

Part II Long-term Capital Gains and Losses - Assets Held More Than One Year

1a Stocks, Bonds, Other Securities, and Real Estate. Include Form 1099-B and 1099-S Transactions. See Instructions.

	1	1	1				
	1	1	1				
	1	1	1				
	1	1	1				
	1	1	1				
	1	1	1				
	1	1	1				
	1	1	1				
	1	1	1				

8b Amounts from Schedule D-1, line 8b (attach Schedule D-1)

8c Total of All Sales Price Amounts

Add column (d) of lines 8a and 8b ▶ 8c

*4 Other Transactions (Do NOT include real estate transactions from Forms 1099-S on this line. Report them on line 8a.)

[illegible]

9 Long-term gain from sale or exchange of your home from Form 2119, line 10 or 14c

10 Long-term gain from installment sales from Form 6252, line 22 or 30

ff. Not long-term gain or (loss) from partnerships, S corporations, and fiduciaries

12 Capital gain distributions

13 Gain from Form 4797, line 7 or 8

14 Long-term capital loss carryover from 1990 Schedule D, line 35.

15 Add lines 8a, 8b, 8d, and 8 through 14, in columns (f) and (g)

16 Net long-term capital gain or (loss). Combine columns (f) and (g) of line 15

For Paperwork Reduction Act Notice, see Form 1040 Instructions.

07X006

Schedule D (Form 1040) 199

Name(s) as shown on Form 1040. (Do not enter name and social security number if shown on other side.)

Your social security number

GEORGE H.W. & BARBARA P. BUSH

Part III Summary of Parts I and II

17	Combine lines 7 and 16, and enter the net gain or (loss) here. If result is a gain, also enter the gain on Form 1040, line 13. (Note: If both lines 16 and 17 are gains, see Part IV below)	17	40,847
18	If line 17 is a (loss), enter here and as a (loss) on Form 1040, line 13, the smaller of: a The (loss) on line 17; or b (\$3,000) or, if married filing a separate return, (\$1,500)	18	

Note: When figuring whether line 18a or 18b is smaller, treat both numbers as positive.

Complete Part V if the loss on line 17 is more than the loss on line 18, OR if Form 1040, line 37, is zero.

Part IV Tax Computation Using Maximum Capital Gains Rate

USE THIS PART TO FIGURE YOUR TAX ONLY IF BOTH LINES 16 AND 17 ARE GAINS, AND:

You checked filing status box:		AND	Form 1040, line 37, is over:	You checked filing status box:		AND	Form 1040, line 37, is over:
1			\$49,300	3			\$41,075
2 or 5			\$82,150	4			\$70,450

19	Enter the amount from Form 1040, line 37	19	654,972
20	Enter the smaller of line 16 or line 17	20	40,847
21	Subtract line 20 from line 19	21	614,125
22	Enter: a \$20,350 if you checked filing status box 1; b \$34,000 if you checked filing status box 2 or 5; c \$17,000 if you checked filing status box 3; or d \$27,300 if you checked filing status box 4	22	34,000
23	Enter the greater of line 21 or line 22	23	614,125
24	Subtract line 23 from line 19	24	40,847
25	Figure the tax on the amount on line 23. Use the Tax Table or Tax Rate Schedules, whichever applies	25	183,494
26	Multiply line 24 by 28% (.28)	26	11,437
27	Add lines 25 and 26. Enter here and on Form 1040, line 38, and check the box for Schedule D	27	194,931

Part V Capital Loss Carryovers From 1991 to 1992

Section A. -- Carryover Limit

28	Enter the amount from Form 1040, line 35. If a loss, enclose the amount in parentheses	28	
29	Enter the loss from line 18 as a positive amount	29	
30	Combine lines 28 and 29. If zero or less, enter -0-	30	
31	Enter the smaller of line 29 or line 30	31	

Section B. -- Short-Term Capital Loss Carryover to 1992 (Complete this section only if there is a loss on both lines 7 and 18)

32	Enter the loss from line 7 as a positive amount	32	
33	Enter the gain, if any, from line 16	33	
34	Enter the amount from line 31	34	
35	Add lines 33 and 34	35	
36	Short-term capital loss carryover to 1992. Subtract line 35 from line 32. If zero or less, enter -0-	36	

Section C. -- Long-Term Capital Loss Carryover to 1992 (Complete this section only if there is a loss on both lines 15 and 18)

37	Enter the loss from line 16 as a positive amount	37	
38	Enter the gain, if any, on line 7	38	
39	Enter the amount from line 31	39	
40	Enter the amount, if any, from line 32	40	
41	Subtract line 40 from line 39. If zero or less, enter -0-	41	
42	Add lines 38 and 41	42	
43	Long-term capital loss carryover to 1992. Subtract line 42 from line 37. If zero or less, enter -0-	43	

Part VI Election Not to Use the Installment Method (Complete this part only if you elect out of the installment method and report a note or other obligation at less than full face value.)

44	Check here if you elect out of the installment method	<input type="checkbox"/>
45	Enter the face amount of the note or other obligation	
46	Enter the percentage of valuation of the note or other obligation	

Part VII Reconciliation of Forms 1099-B For Bartering Transactions

(Complete this part if you received one or more Forms 1099-B or substitute statements reporting bartering income.)

Amount of bartering income from Form 1099-B or substitute statement reported on form or schedule

47	Form 1040, line 22	47	
48	Schedule C, D, E, or F (Form 1040) (specify)	48	
49	Other form or schedule (identify) (if nontaxable, indicate reason - attach additional sheets if necessary)	49	
50	Total. Add lines 47 through 49. This amount should be the same as the total bartering income on all Forms 1099-B and substitute statements received for bartering transactions	50	

SCHEDULE E
(Form 1040)Department of the Treasury
Internal Revenue Service (T)**Supplemental Income Schedule**

(From rents, royalties, partnerships, estates, trusts, REMICs, etc.)

▶ Attach to Form 1040 or Form 1041.

▶ See instructions for Schedule E (Form 1040).

OMB No. 1545-0047

1991Attachment
Sequence No. 13

Name(s) as shown on return

Your social security number

GEORGE H.W. & BARBARA P. BUSH**Part I Income or Loss From Rentals and Royalties** Note: Report farm rental income or loss from Form 4835 on page 2, line 38

1 Show kind and location of each rental property:		2 For each rental property listed on line 1, did you or your family use it for personal purposes for more than the greater of 14 days or 10% of the total days rented at fair rental value during the tax year? (See instructions.)			Yes	No
A	BOOK--LOOKING FORWARD					
B	BOOK-- MILLIE'S BOOK					
C						

Rental and Royalty Income		Properties			D Totals (Add columns A, B, and C)
		A	B	C	
3 Rents received	3				3
4 Royalties received	4	2,718	889,176		4 891,894
Rental and Royalty Expenses					
5 Advertising	5				
6 Auto and travel	6				
7 Cleaning and maintenance	7				
8 Commissions	8	1,359			
9 Insurance	9				
10 Legal and other professional fees	10				
11 Mortgage interest paid to banks, etc. (see instructions)	11				11
12 Other interest	12				
13 Repairs	13				
14 Supplies	14				
15 Taxes	15				
16 Utilities	16				
17 Wages and salaries	17				
18 Other (list)	18				
19 Add lines 5 through 18	19	1,359			19 1,359
20 Depreciation expense or depletion (see instructions)	20				20
21 Total expenses. Add lines 19 and 20	21	1,359			
22 Income or (loss) from rental or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see instructions to find out if you must file Form 6198	22	1,359	889,176		
23 Deductible rental loss. Caution: Your rental loss on line 22 may be limited. See instructions to find out if you must file Form 8582	23				
24 Income. Add rental and royalty income from line 22. Enter the total income here	24				890,535
25 Losses. Add royalty losses from line 22 and rental losses from line 23. Enter the total losses here	25				
26 Total rental or royalty income or (loss). Combine amounts on lines 24 and 25. Enter the result here. If Parts II, III, IV and line 38 on page 2 do not apply to you, enter the amount from line 26 on Form 1040, line 18. Otherwise, include the amount from line 26 in the total on line 40 on page 2	26				890,535

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule E (Form 1040) 1991

Name(s) as shown on Form 1040

Your social security number

GEORGE H.W. & BARBARA P. BUSH

Note: If you report amounts from farming or fishing on Schedule E, you must include your gross income from those activities on line 41 below.

Part II Income or Loss from Partnerships and S Corporations

If you report a loss from an at-risk activity, you MUST check either column (e) or (f) of line 27 to describe your investment in the activity. See Instructions. If you check column (f), you must attach Form 6198.

27	(a) Name	(b) Enter P for partnership; S for S Corporation	(c) Check if foreign partnership	(d) Employer identification number	Investment at risk?	
					(e) All is at risk	(f) Some is not at risk
A						
B						
C						
D						
E						

Passive Income and Loss		Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss from Schedule K-1	(j) Sec. 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
A				
B				
C				
D				
E				

28 a Totals				
b Totals				
29 Add amounts in columns (h) and (k), line 28a. Enter total income here			29	
30 Add amounts in columns (g), (i), and (j), line 28b. Enter total here			30	
31 Total partnership and S corporation income or (loss). Combine amounts on lines 29 and 30. Enter the result here and include in the total on line 40 below			31	

Part III Income or Loss from Estates and Trusts

32	(a) Name	(b) Employer identification number
A	PRES. & MRS. BUSH BLIND TRUST	52-6224648
B		
C		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A	173,384		
B			
C			
33 a Totals	173,384		
b Totals			

34 Add amounts in columns (d) and (f), line 33a. Enter total income here	34	173,384
35 Add amounts in columns (c) and (e), line 33b. Enter total here	35	
36 Total estate and trust income or (loss). Combine amounts on lines 34 and 35. Enter the result here and include in the total on line 40 below	36	173,384

Part IV Income or Loss from Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

37	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules O, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules O, line 1b	(e) Income from Schedules O, line 3b

38 Combine columns (d) and (e) only. Enter the result here and include in line 40 below	38	
---	----	--

Part V Summary

39 Net farm rental income or (loss) from Form 4835. (Also complete line 41 below.)	39	
40 TOTAL income or loss. Combine amounts on lines 26, 31, 36, 38, and 39. Enter the result here and on Form 1040, line 15	40	1063,919
41 Reconciliation of Farming and Fishing Income: Enter your gross farming and fishing income reported in Parts II and III, and on line 39 (see instructions)	41	

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service

Self-Employment Tax

▶ See Instructions for Schedule SE (Form 1040).
▶ Attach to Form 1040.

92-4012

OMB No. 1545-0047

1991

Attachment
Sequence No. 17

Name of person with self-employment income (as shown on social security card):

BARBARA P. BUSH

Social security number of person
with self-employment income ▶

Who Must File Schedule SE

You must file Schedule SE if:

- Your net earnings from self-employment from other than (line 4 of Short Schedule SE or line 4c of Long Schedule SE) were \$400 or more, OR
- You had church employee income (as defined in the instructions) of \$108.28 or more;
AND
- Your wages (and tips) subject to social security AND Medicare tax (or railroad retirement tax) were less than \$125,000.

Exception: If your only self-employment income was from earnings as a minister, member of a religious order, or Christian Science practitioner, AND you filed Form 4361 and received IRS approval not to be taxed on those earnings, DO NOT file Schedule SE. Instead, write "Exempt-Form 4361" on Form 1040, line 47.

Note: Most people can now use Short Schedule SE on this page. But, you may have to use Long Schedule SE on the back.

Who MUST Use the Long Schedule SE (Section B)

You must use Long Schedule SE if ANY of the following apply:

- You received wages and the total of all of your wages subject to social security, Medicare, or railroad retirement tax plus your net earnings from self-employment is more than \$3,400;
- You use either "optional method" to figure your net earnings from self-employment (see Section B, Part II, and the instructions);
- You are minister, member of a religious order, or Christian Science practitioner and you received IRS approval (by filing Form 4361) not to be taxed on your earnings from these sources, but you owe self-employment tax on other earnings;
- You had church employee income of \$108.28 or more that was reported to you on Form W-2; OR
- You had tip income that is subject to social security, Medicare, or railroad retirement tax but did not report those tips to your employer.

Section A - Short Schedule SE (Read above to see if you must use Long Schedule SE on the back (Section B).)

1	Net farm profit or (loss) from Schedule F (Form 1040), line 37, and farm partnerships, Schedule K-1 (Form 1065), line 15a	1	
2	Net profit or (loss) from Schedule C (Form 1040), line 31, and Schedule K-1 (Form 1065), line 15a (other than farming). See the instructions for other income to report	2	789,176
3	Combine lines 1 and 2	3	789,176
4	Net earnings from self-employment. Multiply line 3 by .9235. If less than \$400, do not file this schedule; you do not owe self-employment tax. Caution: If you received wages or tips, and the total of your wages (and tips) subject to social security, Medicare, or railroad retirement tax plus the amount on line 4 is more than \$53,400, you cannot use Short Schedule SE. Instead, use Long Schedule SE on the back ▶	4	728,804
5	Self-employment tax. If the amount on line 4 is: <ul style="list-style-type: none"> • \$53,400 or less, multiply line 4 by 15.3% (.153) and enter the result. • More than \$53,400, but less than \$125,000, multiply the amount in excess of \$53,400 by 2.9% (.029). Add \$8,170.20 to the result and enter the total. • \$125,000 or more, enter \$10,246.60 Also enter this amount on Form 1040, line 47	5	10,247

Note: Also enter one-half of the amount from line 5 on Form 1040, line 25.

Form 1116

Computation of Foreign Tax Credit

Department of the Treasury
Internal Revenue ServiceIndividual, Fiduciary, or Nonresident Alien Individual
▶ Attach to Form 1040, 1040NR, 1041 or 990-T.
▶ See separate instructions

Name

Identifying number as shown on page 1 of your tax return

GEORGE H.W. & BARBARA P. BUSH

Use a separate Form 1116 for each category of income listed below. Check only one box. Before you check a box, read

Categories of Income on page 3 of the Instructions. This form is being completed for credit for taxes on:

- ☐ Passive income ☐ Shipping Income ☐ Lump-sum distributions (see instructions before completing form)
☐ High withholding tax interest ☐ Dividends from a DISC or former DISC
☐ Financial services income ☐ Distributions from a foreign sales corporation (FSC) or former FSC ☒ General limitation income - all other income from sources outside the United States (including income from sources within U.S. possessions)

Resident of (name of country) ▶ UNITED STATES

Note: If you paid taxes to one foreign country, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country, use a separate column and line for each country.

Part I Taxable Income from Sources Outside the United States for Separate Category Checked Above

Enter the Name of the Foreign Country or U.S. possession

A VARIOUS

B

C

1 Gross income from sources within country shown above and of the type checked above (see instructions):

DIVIDENDS & INTEREST

Applicable deductions and losses (See instructions):

2 Expenses directly allocable to income on line 1 (attach schedule)

3 Pro rata share of all other deductions not directly allocable:

a Certain itemized deductions or standard deduction (see instructions)

b Other deductions (attach schedule)

c Add lines 3a and 3b

d Total foreign source income (See instructions)

e Gross income from all sources (See instructions)

f Divide line 3d by line 3e

g Multiply line 3c by line 3f

4 Pro rata share of interest expense (See instructions):

a Home mortgage interest from line 5 of the worksheet on page 5 of the instructions

b Other interest

5 Losses from foreign sources

6 Add lines 2, 3g, 4a, 4b, and 5

7 Subtract line 6 from line 1. Enter the result here and on line 14

Part II Foreign Taxes Paid or Accrued

C O U N T R Y	Credits claimed for taxes (you must check one): <div><input checked="" type="checkbox"/> Paid <input type="checkbox"/> Accrued</div>	Foreign Taxes Paid or Accrued								
		In Foreign Currency				In U.S. Dollars				
		Taxes Withheld at Source on:			(d) Other Foreign Taxes Paid or Accrued	Taxes Withheld at Source on:			(h) Other Foreign Taxes Paid or Accrued	(i) Total Foreign Taxes Paid or Accrued (Add Col. (a) through (h))
		Date Paid or Accrued	(a) Dividends	(b) Rents and Royalties		(c) Interest	(e) Dividends	(f) Rents and Royalties		
A	12/31/91					374				374
B										
C										

8 Add lines A through C, column (f). Enter total here and on line 9

For Paperwork Reduction Act Notice, see page 1 of separate instructions.

Cat. No. 11440U

Form 1116 (1991)

Form 1116 (1991)

Part III Figuring the Credit

9 Enter amount from line 8. This is the total foreign taxes paid or accrued for the category of income checked above in Part I.	9	374.	
10 Carryback or carryover (attach detailed computation).	10		
11 Add lines 9 and 10.	11	374.	
12 Reduction in foreign taxes (see instructions)	12		
13 Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit	13		374.
14 Enter amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. (See instructions)	14	1,131.	
15 Adjustments to line 14 (See instructions)	15		
16 Combine the amounts on line 14 and line 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the type of income you checked on page 1. Skip lines 17 through 21.)	16		1,131.
17 Individuals: Enter amount from Form 1040, line 35. If you are a nonresident alien, enter amount from Form 1040NR, line 33. Estates and trusts: Enter your taxable income without the deduction for your exemption.	17	654,972.	
18 Divide line 16 by line 17. (If line 16 is more than line 17, enter the figure "1.")	18		.001730
19 Individuals: Enter amount from Form 1040, line 40, less any amounts on Form 1040, lines 41 and 42. Enter amount from Form 1040NR, line 33 less any amount on Form 1040NR, line 39. Estates and trusts: Enter amount from Form 1041, Schedule G, line 1c, or Form 990-T, line 8.	19		194,931.
20 Multiply line 19 by line 18. (Maximum amount of credit.)	20		337.
21 Enter the amount from line 13 or line 20, whichever is smaller. (If this is the only Form 1116 you are completing, skip lines 22 through 29 and enter this amount on line 30. Otherwise, complete the appropriate lines in Part IV.)	21		337.

Part IV Summary of Credits from Separate Parts III (See instructions.)

22 Credit for taxes on passive income	22		
23 Credit for taxes on high withholding tax interest	23		
24 Credit for taxes on financial services income	24		
25 Credit for taxes on shipping income	25		
26 Credit for taxes on dividends from a DISC or former DISC	26		
27 Credit for taxes on distributions from a FSC or former FSC	27		
28 Credit for taxes on lump-sum distributions	28		
29 Credit for taxes on general limitation income (all other income from sources outside the U.S.)	29	337.	
30 Add lines 22 through 29	30		337.
31 Reduction of credit for international boycott operations (See instructions for line 12.)	31		
32 Subtract line 31 from line 30. This is your foreign tax credit. Enter here and on Form 1040, line 43; Form 1040NR, line 40; Form 1041, Schedule G, line 2a; or Form 990-T, line 9a	32		337.

ALT MIN TAX
Form 1116

Department of the Treasury
Internal Revenue Service

Computation of Foreign Tax Credit

Individual, Fiduciary, or Nonresident Alien Individual
▶ Attach to Forms 1040, 1040NR, 1041 or 990-T.
▶ See separate instructions

OMB No. 1545-0047
1991
Attachment
Sequence No.

Name: **GEORGE H.W. & BARBARA P. BUSH** Identifying number as shown on page 1 of your tax return

Use a separate Form 1116 for each category of income listed below. Check only one box. Before you check a box, read

Categories of income on page 3 of the instructions. This form is being completed for credit for taxes on:

- ☐ Passive income ☐ Shipping income ☐ Lump-sum distributions (see instructions before completing form)
- ☐ High withholding tax interest ☐ Dividends from a DISC or former DISC ☒ General limitation income - all other income from sources outside the United States (including income from sources within U.S. possessions)
- ☐ Financial services income ☐ Distributions from a foreign sales corporation (FSC) or former FSC

Resident of (name of country) ▶ **UNITED STATES**

Note: If you paid taxes to one foreign country, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country, use a separate column and line for each country.

Part I Taxable Income from Sources Outside the United States for Separate Category Checked Above

Enter the Name of the Foreign Country or U.S. possession	Foreign Country or U.S. Possession			Total	
	A	B	C	(Add Cols. A, B, and C)	
A VARIOUS					
B					
C					
1 Gross income from sources within country shown above and of the type checked above (see instructions): DIVIDENDS & INTEREST					
	2,291			1	2,291
Applicable deductions and losses (See instructions):					
2 Expenses directly allocable to income on line 1 (attach schedule)					
3 Pro rata share of all other deductions not directly allocable:					
a Certain itemized deductions or standard deduction (see instructions)	625,494				
b Other deductions (attach schedule)	5,124				
c Add lines 3a and 3b	630,618				
d Total foreign source income (See instructions)	2,291				
e Gross income from all sources (See instructions)	1329,580				
f Divide line 3d by line 3e	.001720				
g Multiply line 3c by line 3f	1,085				
4 Pro rata share of interest expense (See instructions):					
a Home mortgage interest from line 5 of the worksheet on page 5 of the instructions					
b Other interest					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5	1,085			6	1,085
7 Subtract line 6 from line 1. Enter the result here and on line 14				7	1,206

Part II Foreign Taxes Paid or Accrued

C O U N T R Y	Credits claimed for taxes you must check one: <div><input checked="" type="checkbox"/> Paid <input type="checkbox"/> Accrued</div>	Foreign Taxes Paid or Accrued								
		In Foreign Currency				In U.S. Dollars				
		Taxes Withheld at Source on:			(d) Other Foreign Taxes Paid or Accrued	Taxes Withheld at Source on:			(h) Other Foreign Taxes Paid or Accrued	(i) Total Foreign Taxes Paid or Accrued (Add Cols (e) through (h))
		(a) Dividends	(b) Rents and Royalties	(c) Interest		(e) Dividends	(f) Rents and Royalties	(g) Interest		
A	12/31/91					374				374
B										
C										

8 Add lines A through C, column (j). Enter total here and on line 9

For Paperwork Reduction Act Notice, see page 1 of separate instructions.
DTX020

Cat. No. 11440U

Form 1116 (1991)

Form 1118 (1981)

Part III Figuring the Credit

9	Enter amount from line 8. This is the total foreign taxes paid or accrued for the category of income checked above in Part I.	9	374.
10	Carryback or carryover (attach detailed computation).	10	
11	Add lines 9 and 10.	11	374.
12	Reduction in foreign taxes (see instructions).	12	
13	Subtract line 12 from line 11. This is the total amount of foreign taxes available for credit.	13	374.
14	Enter amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I. (See Instructions).	14	1,206.
15	Adjustments to line 14 (See Instructions).	15	
16	Combine the amounts on line 14 and line 15. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the type of income you checked on page 1. Skip lines 17 through 21.)	16	1,206.
17	Individuals: Enter amount from Form 1040, line 35. If you are a nonresident alien, enter amount from Form 1040NR, line 33. Estates and trusts: Enter your taxable income without the deduction for your exemption.	17	664,589.
18	Divide line 16 by line 17. (If line 16 is more than line 17, enter the figure "1.")	18	.001810
19	Individuals: Enter amount from Form 1040, line 40, less any amounts on Form 1040, lines 41 and 42. Enter amount from Form 1040NR, line 38 less any amount on Form 1040NR, line 39. Estates and trusts: Enter amount from Form 1041, Schedule G, line 1c, or Form 990-T, line 8.	19	159,501.
20	Multiply line 19 by line 18. (Maximum amount of credit).	20	289.
21	Enter the amount from line 13 or line 20, whichever is smaller. (If this is the only Form 1118 you are completing, skip lines 22 through 29 and enter this amount on line 30. Otherwise, complete the appropriate lines in Part IV.)	21	289.

Part IV Summary of Credits from Separate Parts III (See Instructions.)

22	Credit for taxes on passive income.	22	
23	Credit for taxes on high withholding tax interest.	23	
24	Credit for taxes on financial services income.	24	
25	Credit for taxes on shipping income.	25	
26	Credit for taxes on dividends from a DISC or former DISC.	26	
27	Credit for taxes on distributions from a FSC or former FSC.	27	
28	Credit for taxes on lump-sum distributions.	28	
29	Credit for taxes on general limitation income (all other income from sources outside the U.S.).	29	289.
30	Add lines 22 through 29.	30	289.
31	Reduction of credit for international boycott operations (See instructions for line 12.).	31	
32	Subtract line 31 from line 30. This is your foreign tax credit. Enter here and on Form 1040, line 43; Form 1040NR, line 40; Form 1041, Schedule G, line 2a; or Form 990-T, line 9a.	32	289.

Form 6251

Alternative Minimum Tax - Individuals

Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

▶ Attach to Form 1040 or 1040NR, Estate and trusts, use Form 8655.

Name(s) shown on Form 1040

Your social security number

GEORGE H.W. & BARBARA P. BUSH

1	Enter the amount from Form 1040, line 35. (If Form 1040, line 35 is less than zero, enter as a negative amount.)	1	654,972
2	Net operating loss deduction, if any, from Form 1040, line 22. (Enter as a positive amount)	2	
3	Overall itemized deductions limitation (see instructions)	3	-36,734
4	Combine lines 1, 2, and 3	4	618,238
5	Adjustments: (See instructions before completing.)		
a	Standard deduction, if any, from Form 1040, line 34	5a	
b	Medical and dental expense (Enter the smaller of the amount from Schedule A (Form 1040), line 4 or 2 1/2% of Form 1040, line 32.)	5b	
c	Miscellaneous itemized deductions from Schedule A, (Form 1040), line 24	5c	14,871
d	Taxes from Schedule A, (Form 1040), line 8	5d	29,119
e	Refund of taxes	5e	
f	Certain home mortgage interest	5f	
g	Investment interest expense	5g	
h	Depreciation of tangible property placed in service after 1986	5h	2,361
i	Circulation and research and experimental expenditures paid or incurred after 1986	5i	
j	Mining exploration and development costs paid or incurred after 1986	5j	
k	Long-term contracts entered into after 2/28/86	5k	
l	Pollution control facilities placed in service after 1986	5l	
m	Installment sales of certain property	5m	
n	Adjusted gain or loss and incentive stock options	5n	
o	Certain loss limitations	5o	
p	Tax shelter farm loss	5p	
q	Passive activity loss	5q	
r	Beneficiaries of estates and trusts	5r	
s	Combine lines 5a through 5r	5s	46,351
6	Tax preference items: (See instructions before completing.)		
a	Appreciated property charitable deduction	6a	
b	Tax-exempt interest from private activity bonds issued after 8/7/86	6b	
c	Depletion	6c	
d	Accelerated depreciation of real property placed in service before 1987	6d	
e	Accelerated depreciation of leased personal property placed in service before 1987	6e	
f	Amortization of certified pollution control facilities placed in service before 1987	6f	
g	Intangible drilling costs	6g	
h	Add lines 6a through 6g	6h	
7	Combine lines 4, 5s, and 6h	7	664,589
8	Energy preference adjustment for certain taxpayers. (Do not enter more than 40% of line 7.) See instructions	8	0
9	Subtract line 8 from line 7	9	664,589
10	Alternative tax net operating loss deduction. See instructions for limitations	10	
11	Alternative minimum taxable income. Subtract line 10 from line 9. If married filing a separate return, see inst.	11	664,589
12	Enter: \$40,000 (\$20,000 if married filing separately; \$30,000 if single or head of household)	12	40,000
13	Enter: \$150,000 (\$75,000 if married filing separately; \$112,500 if single or head of household)	13	150,000
14	Subtract line 13 from line 11. If zero or less, enter -0- here and on line 15 and go to line 16	14	514,589
15	Multiply line 14 by 25% (.25)	15	128,647
16	Exemption. Subtract line 15 from line 12. If zero or less, enter -0-. If completing this form for a child under age 14, see instructions for amount to enter	16	
17	Subtract line 16 from line 11. If zero or less, enter -0- here and on line 22 and skip lines 18 through 21	17	664,589
18	Multiply line 17 by 24% (.24)	18	159,501
19	Alternative minimum tax foreign tax credit. See instructions	19	289
20	Tentative minimum tax. Subtract line 19 from line 18	20	159,212
21	Enter your tax from Form 1040, line 38, minus foreign tax credit on Form 1040, line 43. If an amount is entered on line 39 of Form 1040, see instructions	21	194,594
22	Alternative minimum tax. Subtract line 21 from line 20. If zero or less, enter -0-. Enter this amount on Form 1040, line 48. If completing this form for a child under age 14, see instructions for amount to enter	22	0

For Paperwork Reduction Act Notice, see separate instructions.

Form 6251 (1991)

GEORGE H.W. & BARBARA P. BUSH

STATEMENT A-1

===== STATE AND LOCAL TAXES PAID =====

STATE AND LOCAL INCOME TAXES	4,190
TOTAL STATE & LOCAL TAXES PAID	4,190 **
CARRIED TO SCHEDULE A, LINE 5	

===== OTHER TAXES EXPENSE =====

PERSONAL PROPERTY TAXES	122
TOTAL OTHER TAXES EXPENSE	122 **
CARRIED TO SCHEDULE A, LINE 7	

===== CASH CONTRIBUTIONS - 50 PCT. LIMIT =====

VARIOUS ORGANIZED CHARITIES	818,126
FROM ESTATE/TRUST 52-6224648	677
TOTAL	818,803 **
INCLUDED IN SCH. A, LINE 13	

===== MISCELLANEOUS DEDUCTIONS SUBJECT TO 2% FLOOR =====

FED EXP CHGS RE TAX INFORMATION	13
LEGAL FEES-TAX ADVICE/OTHER MATTERS	25,000
FEES & SEC. 212 EXP THROUGH PRESIDENT	16,347
AND MRS. GEORGE BUSH QUALIFIED BLIND TRUST	
TOTAL MISC. DEDNS. SUBJECT TO LIMIT	41,360 **
CARRIED TO SCHEDULE A, LINE 20	

GEORGE H.W. & BARBARA P. BUSH

----- STATEMENT OF WAGES AND SALARY INCOME -----

	Gross wages	Fed. tax withheld	Tot. FICA/ Medicare w/h
(T) THE WHITE HOUSE			
200,000	66,000	5,123	
TOTALS:			
(T) 200,000	66,000	5,123	

92-4012

23

1 Control number		OMB No. 1545-0048									
2 Employer's name, address, and ZIP code The White House Office of Administration Personnel Management Division Room 4013, NEOE, 725 17th Street NW Washington, D.C. 20503				6 Statutory employee	Deceased	Pension plan	Legal rep.	941 emp.	Subtotal	Deferred compensation	Yard
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Employer's identification number				4 Employer's state I.D. number		7 Allocated tips		8 Advance EIC payment			
5 Employee's social security number						9 Federal income tax withheld \$66,000.00		10 Wages, tips, other compensation \$200,000.00			
19 Employee's name, address, and ZIP code George H. W. Bush The White House Washington, D.C. 20500				11 Social security tax withheld \$3,310.80		12 Social security wages \$53,400.00					
				13 Social security tips		14 Medicare wages and tips \$125,000.00					
				15 Medicare tax withheld \$1,812.50		16 Nonqualified plans					
				17 See Instrs. for Box 17		18 Other					
20				21		22 Dependent care benefits		23 Benefits included in Box 10			
24 State income tax		25 State wages, tips, etc.		26 Name of state		27 Local income tax		28 Local wages, tips, etc.		29 Name of locality	

Copy B To Be Filed With Employee's FEDERAL Tax Return

Department of the Treasury—Internal Revenue Service

Form W-2 Wage and Tax Statement 1991

This information is being furnished to the Internal Revenue Service.

GEORGE H. W. AND BARBARA P. BUSH
1991 CHARITABLE CONTRIBUTIONS

Ducks Unlimited Foundation Brunswick, ME	\$ 200
1st Congregational Church Kennebunkport, ME	2,600
St. Martin's Episcopal Church Houston, TX	1,000
St. John's Church Washington, DC	1,000
River Tree Arts Kennebunkport, ME	50
American Red Cross Washington, DC	1,200
Black Student Fund Washington, DC	500
Memorial Sloan-Kettering Cancer Center New York, NY	800
Leukemia Society Houston, TX	200
United Way Biddeford, ME	300
Trustees of Phillips Academy Andover, MA	1,000
United Negro College Fund New York, NY	1,680
M. D. Anderson Cancer Center Houston, TX	1,680
Yale University New Haven, CT	
Alumni	500
Class of 1948	40
Maine Medical Center Portland, ME	500

(25)

GEORGE H. W. AND BARBARA P. BUSH
1991 CHARITABLE CONTRIBUTIONS
(Continued)

Morehouse School of Medicine Atlanta, GA	\$ 1,000
United Way Houston, TX	1,000
Combined Federal Campaign Washington, DC	1,000
Star of Hope Mission Houston, TX	300
Salvation Army Houston, TX	1,200
Ashley Hall Foundation Charleston, SC	100
Kennebunkport Village Fire Company Kennebunkport, ME	250
Sweetser Childrens Home Saco, ME	100
The Barbara Bush Foundation for Family Literacy Washington, DC	789,176
Brick Store Museum Kennebunk, ME	30
Alumni of Smith College Northhampton, MA	200
Thyroid Foundation Boston, MA	500
Louis T. Graves Memorial Library Kennebunkport, ME	100
Bread for the City Washington, DC	100
Crohns & Colitis Foundation New York, NY	1,000

(26)

GEORGE H. W. AND BARBARA P. BUSH
1991 CHARITABLE CONTRIBUTIONS
(Continued)

The Patriots Foundation Washington, DC	500
Billy Graham Evangelistic Ass'n Minneapolis, MN	100
Ronald Reagan Presidential Foundation Washington, DC	1,000
South Central YMCA Houston, TX	100
AmeriCares Foundation New Canaan, CT	1,000
International Rescue Committee New York, NY	1,000
Desert Storm Foundation Washington, DC	1,000
Presiding Bishops Fund New York, NY	1,000
Ashley Barrasso Cancer Research Fund The Pittsburgh Foundation Pittsburgh, PA	500
American Cancer Society Houston, TX	250
David G. Placsh Aviation Scholarship Fund Greater Portsmouth Community Foundation Portsmouth, NH	20
National Law Enforcement Memorial Washington, DC	500
Desert Storm Surviving Dependents Fund Washington, DC	200
Kick Drugs Out of America Washington, DC	250

GEORGE H. W. AND BARBARA P. BUSH
1991 CHARITABLE CONTRIBUTIONS
(Continued)

27

Christ Memorial Chapel Hobe Sound, FL	200
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Kinkaid School Houston, TX	200
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Gladney Society Fort Worth, TX	500
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Southern Maine Medical Center Biddeford, ME	500
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SUB-TOTAL	818,126
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Through President and Mrs. George Bush Qualified Blind Trust	677
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TOTAL	<u>\$818,803</u>
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